# **CONTRA COSTA COUNTY**

## SUBDIVISION AGREEMENT EXTENSION

**Development Number:** SD05-08971

Developer: Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation

Original Agreement Date: September 17, 2013

Second Extension New Termination Date: September 17, 2017

## Improvement Security

**SURETY:** 

The Continental Insurance Company

BOND No.

929 574 175

Date:

July 15, 2013

Daniel P. Dunigan, Attorney-in-Fact

Printed

Security Type

**Security Amount** 

Cash:

10,000.00

(1% cash, \$1,000 Min.)

SURETY BOND:

1,028,000.00

(Performance)

519,000.00 (Labor& Material)

The Developer and the Surety desire this Agreement to be extended through the above date; and Contra Costa County and said Surety hereby agree thereto and acknowledge same.

Dated:	Dated: MAY 23, 8017				
POD CONTRA COCTA COLDITA	Ster Saage				
FOR CONTRA COSTA COUNTY	Developer's Signature(s)				
Julia R. Bueren, Public Works Director	Steve Savage				
Ву:	Printed				
RECOMMENDED FOR APPROVAL:	Developer's Signature(s)  Printed  Printed				
Ву:	Address Address (A 94566				
(Engineering Services Division)	Address / CA 94566				
	THE CONTINENTAL INSURANCE COMPANY				
(NOTE: Developer's, Surety's and Financial	Surety or Financial Institution				
Institution's Signatures must be Notarized.)	100 Matsonford Road, Suite 200, Radnor, PA 19087				
institution's dignutures must be ivolutized,	Address				
FORM APPROVED: Victor J. Westman, County Counsel	Tidd out				
After Approval Return to Clerk of the Board	Attorney in Facts Signature				

# **ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

validity of that document.						
State of California County of Alameda	)					
On June 8, 2017	before me,	Kristine E. D	Desrosiers, No me and title o	otary Public f the officer)		
personally appearedSteve Savage, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.						
I certify under PENALTY OF PERJ paragraph is true and correct.	URY under t	he laws of the	State of Calif	ornia that the foregoing		
WITNESS my hand and official sea	al.			KRISTINE E. DESROSIERS Notary Public - California Alameda County Commission # 2170165		
Signature Sustine Ellea	rosies	_ (Seal)	M	ly Comm. Expires Oct 31, 2020		

# **ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

validity of that document.	
State of California County ofAlameda	_)
On June 8, 2017 before m	e, Kristine E. Desrosiers, Notary Public  (insert name and title of the officer)
subscribed to the within instrument and acknowledge his/her/their authorized capacity(ies), and that	y evidence to be the person(s) whose name(s) is/are owledged to me that he/she/they executed the same in at by his/her/their signature(s) on the instrument the the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under paragraph is true and correct.	er the laws of the State of California that the foregoing
WITNESS my hand and official seal.	KRISTINE E. DESROSIERS Notary Public - California Alameda County
Signature Suptre E Demosiles	Commission # 2170165 My Comm. Expires Oct 31, 2020

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

Civil Code § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfullness, accuracy or validity of that document.

State of PENNSYLVANIA						
County of CHESTER						
On May 23, 2017 bate	pefore me, ARLENE 0STR0FF , Notary Public					
personally appeared DANIEL P. DUNIGAN	Name and liftle of Notary					
Who proved to me on the basis of satisfactory even to be the person(s) whose name(s) is/are substoned to the within instrument and acknowledged to he/she/they executed the same in his/her/their authorapacity(ies), and that by his/her/their signature(s) instrument the person(s), or the entity upon belief which the person(s) acted, executed the instrument the person(s) acted, executed the instrument that the person is acted.	coribed ne that norized on the half of ent.  COMMONWEALTH OF PENNSYLVANIA  NOTARIAL SEAL ARLENE OSTROFF, Notary Public Willistewn Township, Chester County My Commission Expires December 3, 2020					
I certify under PENALTY OF PERJURY under the I the State of California that the foregoing paragraph and correct.	h is true					
Witness my hand and official seal.  Signature Wolfary Public Signature	Place Notary Public Seal Above					
	OPTIONAL					
Though the information below is not required by law, it may prove valuable to the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.						
Description of Attached Document						
Title or Type of Document						
Document Date	Number of Pages:					
Signer's Name:						
	☐ Individual ☐ Corporate Officer — Title(s): ☐ Partner - ☐ Limited ☐ General ☐ Guardian or Conservator ☐ Attorney-in-Fact ☐ Trustee ☐ Other: ☐ Signer is representing					

### POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That The Continental Insurance Company, a Pennsylvania insurance company, is a duly organized and existing insurance company having its principal office in the City of Chicago, and State of Illinois, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

William F Simkiss, Richard J Decker, Daniel P Dunigan, Joseph W Kolok Jr, Brian C Block, James L Hahn, Individually

of Paoli, PA, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

#### - In Unlimited Amounts -

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the insurance company and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law and Resolutions, printed on the reverse hereof, duly adopted, as indicated, by the Board of Directors of the insurance company.

In Witness Whereof, The Continental Insurance Company has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 1st day of July, 2015.



The Continental Insurance Company

Paul T. Bruflat

Vice President

State of South Dakota, County of Minnehaha, ss:

On this 1st day of July, 2015, before me personally came Paul T. Bruflat to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of The Continental Insurance Company, a Pennsylvania insurance company, described in and which executed the above instrument; that he knows the seal of said insurance company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said insurance company and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance company.

S. EICH
NOTARY PUBLIC SALES

My Commission Expires February 12, 2021

S. Eich

Notary Public

### **CERTIFICATE**



The Continental Insurance Company

D. Bult

Assistant Secretary

Form F6850-4/2012

## **Authorizing Resolutions**

## ADOPTED BY THE BOARD OF DIRECTORS OF THE CONTINENTAL INSURANCE COMPANY:

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the Board of Directors of the Company at a meeting held on May 10, 1995.

"RESOLVED: That any Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execution power of attorneys on behalf of The Continental Insurance Company.

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25<sup>th</sup> day of April, 2012:

"Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the "Authorized Officers") to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, "Electronic Signatures"); Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company."

### THE CONTINENTAL INSURANCE COMPANY

## Radnor, Pennsylvania Statement of Net Admitted Assets and Liabilities December 31, 2016

### **ASSETS**

<u> </u>	1717122117			
Bonds			\$	1,134,642,999
Stocks				146,454,381
Cash and short-term investments				208,940,675
Receivables for securities				15,218
Investment income due and accrued				14.853,145
Amounts recoverable from reinsurers				86,857,208
Funds held by or deposited with reinsured companies				1,463,083
Net deferred tax asset				56,055,855
Premiums and considerations				16,951,925
Other assets				1.251,000
Total Assets			\$	1.667,485,489
	a tres arises tra			
	S AND SURPLUS		A	012 052 /72
Losses			\$	812,077,677
Loss adjustment expense				37,646,991
Unearned premiums				********
Other expenses				750,799
Ceded reinsurance premiums payable (net of ceding commi-	ssions)			23,147,409
Funds held by company under reinsurance treaties				2,535,486
Provision for reinsurance				76,000,000
Other liabilities				(785.015,440)
Total Liabilities			\$	167.142,922
Surplus Account:				
Capital paid up	\$	53,566,360		
Gross paid in and contributed surplus	•	1,423,436,994		
Special Surplus		257,617,903		
Unassigned funds		(234,278,690	)	
Surplus as regards policyholders	Business and Company of the Company	12.140104070	<u>.</u> \$	1,500,342.567
Total Liabilities and Capital			5	1,667,485,489
read Liamines and Capital			4.	

1, Troy Wray, Assistant Vice President of Continental Insurance Company hereby certify that the above is an accurate representation of the financial statement of the Company dated December 31, 2016, as filed with the various Insurance Departments and is a true and correct statement of the condition of Continental Insurance Company as of that date.

THE CONTINENTAL INSURANCE COMPANY

Assistant Vice President

Subscribed and sworn to me this <u>D</u>day of March 2017 My commission expires:

YOLANDA JIMENEZ OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires September 24, 2017 no finance

Notary Public