CONTRA COSTA COUNTY

ROAD IMPROVEMENT AGREEMENT (RIGHT-OF-WAY LANDSCAPING) EXTENSION

Development Number: RA10-01246 (R.O.W.L.)

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

Original Agreement Date: September 25, 2012

Third Extension New Termination Date: September 25, 2018

Improvement Security

SURETY: The Continental Insurance Company

BOND No. 929 553 673

Date: July 9, 2012

Security Type

Security Amount

Cash:

\$ 3,100.00 (1% cash, \$1,000 Min.)

SURETY BOND:

After Approval Return to Clerk of the Board

\$ <u>46,185.00</u> (Performance)

\$ 155,500.00 (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: November 7, 2017	Dated: AUGUST 28, 2017			
	Sh Saagr			
FOR CONTRA COSTA COUNTY	Developer's Signature(s)			
	Steve Savage			
Julia R. Bueren, Public Works Director	Printed 1			
By:	Davidanaria Signatura(4)			
	Developer's Signature (8) Mark			
	Printed 6300 Kell Contr Plany #320 CA 94566 Address THE CONTINENTAL INSURANCE COMPANY Surety or Financial Institution 100 MATSONFORD ROAD, SUITE 200, RADNOR, PA 19087			
RECOMMENDED FOR APPROVAL:				
By: Mulm difference				
(Engineering Services Division)				
	CHORE D. L. J. C. J.J. W. J. Financial	du la la		
(NOTE: Developer's, Surety's and Financial	Attorney in Facts Signature			
Institution's Signatures must be Notarized.)	DANIEL P. DUNIGAN, ATTORNEY-IN-FACT			
	Printed			
FORM APPROVED: Victor J. Westman, County Counsel	Timed			

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.

State of California County of Alameda)
On September 28th, 2017 b	efore me, Sarah Langmayer, Notary Public (insert name and title of the officer)
personally appeared Steve Savag	2
who proved to me on the basis of sat subscribed to the within instrument a his/her/their authorized capacity(ies),	sfactory evidence to be the person(s) whose name(s) is/are and acknowledged to me that he/she/they executed the same in and that by his/her/their signature(s) on the instrument the which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJUI paragraph is true and correct.	RY under the laws of the State of California that the foregoing
WITNESS my hand and official seal. Signature	SARAH LANGMAYER Commission # 2112370 Notary Public - California Alameda County My Comm. Expires Jun 16, 2019 (Seal)

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.

State of C County of	Mamada)	l		
On Sep	otember 28th, 2017	_ before me,	Sarah Langma	ayer, Notar e and title of	
personall	y appearedRobert D	. Moore			
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 PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.					
WITNESS	S my hand and official se	eal. 1	_ (Seal)		SARAH LANGMAYER Commission # 2112370 Notary Public - California Alameda County y Comm. Expires Jun 16, 2019

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 AUGUST 28, 2017 before me, _	ARLENE 0STR0FF , Notary Public
personally appeared DANIEL P. DUNIGAN	Name and Title of Notary
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 PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Witness my hand and official seal. Signature	COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL ARLENE OSTROFF, Notary Public Willistown Township, Chester County My Commission Expires December 3, 2020
Notary Public Signature	Place Notary Public Seal Above
OPTION.	AL
Though the information below is not required by law, it may prove valuable to the and reattachment of this for	
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 ☐ The Continental Insurance Company ☐ Individual ☐ RIGHTHUMBPRINT OF SIGNER Top of thumb	☐ 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

aul T Brutlat Vie

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

ONOTARY PUBLIC

SOUTH DAKOTA

My Commission Expires February 12, 2021

S. Eich

Notary Public

CERTIFICATE

I, D. Bult, Assistant Secretary of The Continental Insurance Company, a Pennsylvania insurance company, do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Law and Resolution of the Board of Directors of the insurance company printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance company this ______28TH__ day of ___AUGUST______, ___2017 /.



The Continental Insurance Company

D. Bult Assistant Secretary

Form F6850-4/2012