CONTRA COSTA COUNTY

SUBDIVISION AGREEMENT EXTENSION

Development Number: Subdivision 89-07267

Developer: Morgan Capital Investments Properties

Original Agreement Date: April 20, 1999

Tenth Extension New Termination Date: April 20, 2019

IMPROVEMENT SECURITY

Surety: International Fidelity Insurance Company

Bond Number: CAIFSU 0318779 Date: March 6, 2003

Security Type

Security Amount

Address

Attorney in Facts Signature

Cash:

\$ 5,800.00 (1% cash, \$1,000 Min.)

Surety Bond:

\$ 115,000.00 (Performance) \$ 292,450.00 (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: 10/2/18
FOR CONTRA COSTA COUNTY	Developer's Signature(s)
Brian M. Balbas, Public Works Director	Printed
By:	Developer's Signature(s)
RECOMMENDED FOR APPROVAL:	Printed
By:	Address
(Engineering Services Division)	Surety or Financial Institution

NOTE: Developer's, Surety's and Financial Institution's Signatures must be Notarized.)

FORM APPROVED: Victor J. Westman, County Counsel

After Approval Return to Clerk of the Board

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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 Marin On 10 2 - 2018 before me, Mc Date personally appeared Lewis E. Coo	Here Insert Name and Title of the Officer	
	Name(s) of Signer(s)	
subscribed to the within instrument and acknowle	evidence to be the person(s) whose name(s) is/are dged to me that he/she/they executed the same in /her/their signature(s) on the instrument the person(s), ed, executed the instrument.	
0	certify under PENALTY OF PERJURY under the laws f the State of California that the foregoing paragraph true and correct.	
MARI WALSH Commission # 2096165 Notary Public - California	/ITNESS my hand and official seal.	
Marin County My Comm. Expires Feb 3, 2019	Signature of Notary Public	
Place Notary Seal Above		
Though this section is optional, completing this in	ONAL Information can deter alteration of the document or form to an unintended document.	
Title or Type of Document: Surcivision Accompt Number of Pages: Signer(s) Other Than	Named Above:	
Capacity(ies) Claimed by Signer(s) Signer's Name:	Signer's Name:	
☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Other:	☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Other:	
Signer Is Representing:	Signer Is Representing:	

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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	certificate verifies only the identity of the individual who signed the od not the truthfulness, accuracy, or validity of that document.	
State of California)	
County of Contra Costa)	
On09/25/2018 before me,	Maegen I. Allhands, Notary Public .	
Date Date	Here Insert Name and Title of the Officer	
personally appeared	Stephanie Thompson	
	Name(s) of Signer(s)	
subscribed to the within instrument and a	actory evidence to be the person(s) whose name(s) is/are cknowledged to me that he/she/they executed the same in at by his/her/their signature(s) on the instrument the person(s), on(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.	
MAEGEN I. ALLHANDS COMM. # 2229991 ONTARY PUBLIC-CALIFORNIA OCONTRA CONTRA COSTA COUNTY MY COMM. EXP. FEB. 1, 2022	Signature Margue Signature Of Notary Public	
	Signature of Notary Public	
Place Notary Seal Above	- ODTIONAL	
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.		
Description of Attached Document		
Title or Type of Document:	Document Date:	
Number of Pages: Signer(s) Oth	er Than Named Above:	
Capacity(ies) Claimed by Signer(s)	Signer's Name:	
Signer's Name:	☐ Corporate Officer — Title(s):	
☐ Partner — ☐ Limited ☐ General	□ Partner — □ Limited □ General	
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact tor ☐ Trustee ☐ Guardian or Conservator	
☐ Trustee ☐ Guardian or Conserva ☐ Other:		
Signer Is Representing:	Signer Is Representing:	

POWER OF ATTORNEY

INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

One Newark Center, 20th Floor, Newark, New Jersey 07102-5207 PHONE: (973) 624-7200

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

LORI A. BOSSHART, SAMANTHA MASCARENHAS, DOROTHY O'CONNOR, COLLEEN P. O'HARA, STEPHANIE THOMPSON, SUSANNA K.P. TRUONG.

Walnut Creek, CA.

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said **INTERNATIONAL FIDELITY INSURANCE COMPANY** and **ALLEGHENY CASUALTY COMPANY**, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 10th day of July, 2015 :

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 31st day of December, 2016



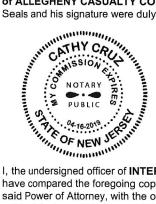
STATE OF NEW JERSEY County of Essex

George R. James

Executive Vice President (International Fidelity Insurance Company) and Vice President (Allegheny Casualty Company)



On this 31st day of December, 2016 before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and of ALLEGHENY CASUALTY COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

Cathy Cruz a Notary Public of New Jersey My Commission Expires April 16, 2019

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day, September 25, 2018

Maria A. Branco