

APPENDIX B - FORM A
COUNTY OF SPOTSYLVANIA, VIRGINIA
SUBDIVISION SURETY BOND

Bond No. _____

KNOWN ALL MEN BY THESE PRESENTS: That we, _____ as Principal, and _____ a _____ corporation, authorized to transact business in the Commonwealth of Virginia, as Surety, are held and firmly bound unto the County of Spotsylvania, Virginia, a Political Subdivision, as Obligee in the penal sum of _____ (\$ _____) lawful money of the United States, for payment of which, well and truly made, the said Principal and Surety bind themselves, their respective heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has received approval for recordation of the plat of the subdivision known as _____ County of Spotsylvania, Virginia, dated _____, and last revised on _____, and has entered into an agreement with the County of Spotsylvania, dated _____, providing for the installation of certain improvements in said subdivision.

NOW, THEREFORE, the condition of the obligation is such that, if the Principal shall satisfactorily complete the subdivision improvements in accordance with the plans approved by and on file with the County of Spotsylvania, the aforesaid agreement, in accordance with the Subdivision Ordinance of the County of Spotsylvania, Virginia, and shall fully indemnify and save harmless the Obligee from all costs and damages which the Obligee may suffer by reason of the Principal's failure to do so, then this obligation shall be void; otherwise, to remain in full force and effect.

PROVIDED FURTHER, that this is a continuous bond and the Surety hereby waives notice of any extension hereunder granted by Obligee to Principal.

IN WITNESS WHEREOF, the Principal and the Surety have caused their respective names to be hereunto subscribed and their seals to be hereunto affixed, this ____ day of _____, 20____, duly authorized.

CORPORATION:

(Impress Corporate Seal here)

(Print) Corporate Name

ATTEST:

By: _____

By: _____
(Signature) Name

Its: _____
(Print) Title

INDIVIDUAL OR PARTNERSHIP:

(print name)

By: _____
(signature)

(print title)

(individual owner)

(individual owner)

(Impress Corporate Seal here)

Surety

Witness

By: _____
Attorney in Fact

Name & Address of
Resident Agent

Address of Home Office

POWER OF ATTORNEY MUST BE ATTACHED