



Liberty Mutual Surety: Seattle  
Western Regional Office  
1001 4th Avenue, 38th Floor  
Seattle, WA 98154  
(206) 473-3788 Fax: (866) 547-7987

## SURETY BOND PACKAGE

Thank you for choosing Liberty Mutual Surety for your bonding business. The enclosed package is a complete set of bond documents. Please file the documents in this bond package that are required by the Obligee. Some documents may not need to be filed.

**Please review the bond to ensure it is accurate - correct form, obligee, principal (contractor) details, etc. It is ultimately the responsibility of the agent and contractor to ensure the bond provided is the correct form and is properly completed.** For immediate changes or corrections, please contact your Liberty Mutual Surety office listed above.

Use the following checklist to ensure the documents are properly signed and distributed.

- If applicable the principal must sign the bond as the name is printed on the bond form. If the principal is a company, any officer of the company may sign the bond.
- This bond has been digitally signed on behalf of the Surety. An Attorney-in-fact signature is not required.
- A Power of Attorney form is included in the bond package. This form should be attached to the bond and filed with the obligee.



**CITY OF PUYALLUP**  
**RIGHT OF WAY OCCUPATION BOND**  
**(PMC 11.05.070(1)(b))**

Bond No. 999428066  
Permit No. \_\_\_\_\_

**KNOW ALL PERSONS BY THESE PRESENTS:**

THAT we, Ford Crane Inc

\_\_\_\_\_, as Principal, and  
The Ohio Casualty Insurance Company \_\_\_\_\_, a company organized and existing under and by virtue of  
the laws of the State of New Hampshire \_\_\_\_\_ authorized to do, and doing business as a surety company  
in the State of Washington, as Surety, are jointly and severally held and firmly bound unto the CITY OF  
PUYALLUP, WASHINGTON, in the penal sum of Five Thousand Dollars And Zero Cents  
\_\_\_\_\_ (\$5,000.00) \_\_\_\_\_

(not less than five thousand dollars (\$5,000.00)), for the payment of which sum on demand we bind  
ourselves, and our successors, heirs, administrators or personal representatives, as the case may be.

DATED at Seattle \_\_\_\_\_, Washington this day 14th of August 2025 .

WHEREAS, the above bounden principal has applied to the City of Puyallup for a permit to  
occupy the City right of way without the taking up, breaking, excavation, tunnelling, undermining,  
cutting, or in any way disturbing or impacting City infrastructure within any public or private properties  
in the City of Puyallup.

WHEREAS, the above bounden principal acknowledges that the estimated cost of work in the  
City right of way, not less than \$5,000, for the permit listed will total not more than the penal sum  
amount of this bond.

NOW, THEREFORE, if the said principal shall during the continuance of such permit faithfully  
perform all of the provisions of said permit and fully comply with the City of Puyallup Ordinances this  
financial guarantee may be released at the discretion of the City Engineer and once the work has been  
accepted as complete by a City of Puyallup inspector signified by the permit being finalized and closed.

Principal Signature \_\_\_\_\_

The Ohio Casualty Insurance Company

Name of Surety \_\_\_\_\_

Principal Name \_\_\_\_\_  
PLEASE PRINT

175 Berkeley Street, Boston, Massachusetts 02116  
Surety Address \_\_\_\_\_

(206) 473-3788 \_\_\_\_\_

Surety Phone Number \_\_\_\_\_



*Timothy A. Mikolajewski*

Surety Representative \_\_\_\_\_

Timothy A. Mikolajewski, Assistant Secretary

Attach Power of Attorney



## POWER OF ATTORNEY

The Ohio Casualty Insurance Company

Principal: Ford Crane Inc

Agency Name: Parker Smith & Feek Insurance LLC

Bond Number: 999428066

Obligee: City of Puyallup

Bond Amount: (\$5,000.00) Five Thousand Dollars And Zero Cents

**KNOW ALL PERSONS BY THESE PRESENTS:** that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint **Timothy A. Mikolajewski** in the city and state of **Seattle, WA**, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

**IN WITNESS WHEREOF**, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 14th day of August, 2025.



The Ohio Casualty Insurance Company

Nathan J. Zangerle, Assistant Secretary

By:

STATE OF PENNSYLVANIA ss  
COUNTY OF MONTGOMERY

On this 14th day of August, 2025, before me personally appeared Nathan J. Zangerle, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

**IN WITNESS WHEREOF**, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal  
Teresa Pastella, Notary Public  
Montgomery County  
My commission expires March 28, 2029  
Commission number 1126044  
Member, Pennsylvania Association of Notaries

Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

### ARTICLE IV – OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

**Certificate of Designation** – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes Nathan J. Zangerle, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

**Authorization** – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

**IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the seals of said Company this 14th day of August, 2025.



Renee C. Llewellyn, Assistant Secretary



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## TRANSACTION REPORT

**Transaction Date:** August 14, 2025

**Preparer Name:** Tim McGee

**Preparer Email:** Tim@FORDCRANE.COM

**Agency Name:** Parker Smith & Feek Insurance LLC

**Agency Code:** 023001

**Principal:**

Ford Crane Inc  
3217 Hewitt Ave  
Everett, WA 98201

**Obligee:**

City of Puyallup  
333 South Meridian  
Puyallup, WA 98371

**Underwriting Information:**

Bond is freely written

**Bond Information:**

**Bond Number:** 999428066

**Effective Date:** August 14, 2025

**Bond Amount:** \$5,000.00

**Expiration Date:** August 14, 2026

**Renewal Type:** Continuous (release required)

**Cancel Days:** 45 Days

**Renewal Billing Method:** Direct Bill

**Class Code:** S910

**Renewal Term (Months):** 12

**Underwriting Paper:** The Ohio Casualty Insurance Company

**Renew Automatically:** Yes

**Bond Rating State:** Washington

**Description of Bond:** Right of Way Occupation

**Renewal Billing Information:**

Ford Crane Inc  
3217 Hewitt Ave  
Everett, WA 98201

**Remarks:**

**Premium Information:**

**Bond Premium:** \$100.00

**Total Premium Due:** \$100.00

**Credit Card Information**

**Card Type:** Visa

**Credit Card Number:** XXXXXXXXXXXX5297

**Transaction Date:** 08/14/2025

**Total Amount Collected:** \$100.00

**Confirmation Number:** 1408C2983486

The credit card provided has been charged for this transaction and no additional fees are owed. Bond(s) changes are available for your agency through <https://agents.libertymutualsurety.com>