

See Instructions to Bidders

NOTE: Type or Print in Ink

PRINCIPAL (Legal name and business address)	TYPE OF ORGANIZATION (Check one) <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT VENTURE <input type="checkbox"/> CORPORATION	
SURETY(IES) (Name(s) and business address(es))	CONTRACT DATE	CONTRACT NO.
SUM AMOUNT OF BOND (Including State Sales Tax) _____ DOLLARS (\$ _____ )		

WE, the Principal and Surety(ies) in accordance with the Revised Code of Washington, are firmly bound and obligated to the State of Washington in the above sum amount on conditions set forth below, for the payment of which we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, that the Principal entered into the contract identified above.

THE ABOVE OBLIGATION shall be void and of no effect if the Principal performs and fulfills all the provisions of such contract and any extensions or modifications thereof that may be made by the State of Washington, and faithfully pays all laborers, mechanics and subcontractors and materialmen, and all persons who shall supply such person or persons, or subcontractors, with materials and supplies for the carrying on of such work, and shall indemnify the State of Washington against any loss or damage directly due to the failure of the Principal to faithfully perform the contract identified above.

IN WITNESS WHEREOF, the Principal and Surety(ies) have executed this payment and performance bond and have affixed their signatures and seals on the date set forth above.

1. NAME OF PRINCIPAL AND TITLE	PHONE NO.	SIGNATURE	<b>L.S.</b> <b>(Corporate Seal)</b>
2.			

<b>S U R E T Y A</b>	NAME AND ADDRESS	LIABILITY LIMIT		<b>L.S.</b> <b>(Corporate Seal)</b>
	1. NAME AND TITLE (Attorney in Fact)	PHONE NO.	SIGNATURE	
	2. NAME AND TITLE (Resident Agent)	PHONE NO.	SIGNATURE	
<b>S U R E T Y B</b>	NAME AND ADDRESS	LIABILITY LIMIT		<b>L.S.</b> <b>(Corporate Seal)</b>
	1. NAME AND TITLE (Attorney in Fact)	PHONE NO.	SIGNATURE	
	2. NAME AND TITLE (Resident Agent)	PHONE NO.	SIGNATURE	