



DIVISION OF MINERAL MINING
900 NATURAL RESOURCES DRIVE, STE 400
CHARLOTTESVILLE, VA 22903
(434) 951-6310

SURETY BOND

Table with 2 columns: Permit Number, Bond

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED

(hereafter PRINCIPAL),

whose principal place of business is

and who does business as a [CHECK ONE ONLY]: Corporation; Limited Partnership; Limited Liability Company; Partnership; or Sole Proprietorship, acting herein as PRINCIPAL, and

(hereafter SURETY),

whose principal business address is and who was organized and is existing under the laws of the State of and licensed to write and perform surety business in the Commonwealth of Virginia, are held and firmly bound unto the

COMMONWEALTH OF VIRGINIA, DIRECTOR, DIVISION OF MINERAL MINING (hereafter OBLIGEE),

in the sum of (\$) Dollars for the payment of which sum the PRINCIPAL and SURETY bind themselves, their heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION is such that:

WHEREAS, the PRINCIPAL proposes to commence mineral mining to be known as in County(ies) of Virginia; and,

WHEREAS, the above-named **PRINCIPAL** has submitted [CHECK ONE ONLY]:
 Permit Tracking Number or Permit Number _____, including a mining and reclamation plan, to conduct and reclaim a mineral mining operation, as defined pursuant to Chapter 16 of Title 45.1 of the Code of Virginia, (hereafter, **CODE**), as amended, with its attendant regulations; and,

WHEREAS, the **PRINCIPAL** has chosen to file this performance bond as a guarantee that the reclamation of the land disturbed during this mining operation will be completed as required by the **CODE**, its attendant regulations, and as specified in the permit as issued; and,

WHEREAS, the **SURETY**, and their successors and assigns agree to guarantee the obligation and to indemnify, defend, and hold harmless **OBLIGEE** from any and all losses and expenses which **OBLIGEE** may sustain as a result of the **PRINCIPAL'S** failure to comply with the condition of the obligation;

WHEREAS, obligations guaranteed by this performance bond shall be in effect for the following described lands approved as the permit area upon which initial or succeeding operations will be conducted:

NOW, if the **PRINCIPAL** faithfully completes all reclamation and abatement requirements set forth in the **CODE** and its Permit issued in reliance on this Surety Bond, including the mining and reclamation plan, then this obligation shall be void; otherwise, it shall remain in full force and effect:

- (a) Beginning on the date of the approval and issuance of [CHECK ONE ONLY]
 Permit Tracking Number or Permit Number _____ and until abatement work pursuant to the **CODE** and the permit has been completed to the satisfaction of the **OBLIGEE**; and
- (b) Until the bond is released pursuant to the **CODE**, replaced in accordance with the **CODE**, or until the permit has been transferred in accordance with the **CODE**.

The failure of the **PRINCIPAL** to fulfill the obligations specified by the **CODE** and its permit shall result in a forfeiture of this performance bond according to the procedures described in the **CODE**.

The **SURETY** shall not cancel this bond at any time for any reason, including non-payment of premium or bankruptcy of the **PRINCIPAL** during the period of liability.

The **SURETY** shall give prompt notice to the **PRINCIPAL** and to the **OBLIGEE** of any notice received or action filed alleging the insolvency or bankruptcy of the **SURETY** or of the

PRINCIPAL, or alleging any violations or regulatory requirements which could result in suspension or revocation of the **SURETY'S** license to do business.

In the event the **SURETY** becomes unable to fulfill its obligations under the bond for any reason, notice shall be given immediately to the **PRINCIPAL** and to the **OBLIGEE**. Any proceeding, legal or equitable, under this bond must be instituted in a Virginia court of competent jurisdiction and shall be governed by the laws of the Commonwealth of Virginia.

Upon the incapacity of the **SURETY** by reason of bankruptcy, insolvency, or suspension or revocation of its license, the **PRINCIPAL** shall be deemed to be without bond coverage in violation of the **CODE** and subject to enforcement actions described therein.

I. BY COMPANY/PRINCIPAL:	
_____ (SEAL) By: _____ Company /Principal	Company/Principal Official
_____	_____
Title	Date
Subscribed and sworn/affirmed to before me by _____,	
this _____ day of _____, 20____, in the City/County of _____.	
	_____ (SEAL)
My Commission expires _____, 20____.	Notary Public

II. BY SURETY: Attach copy bearing seal of Power of Attorney or documentation supporting Corporate Officer's authority to issue surety bond.

Surety Name (SEAL) By: _____
Attorney-in-Fact

Date Typed Name

My Power of Attorney is recorded in the Clerk's Office of the Circuit Court of _____, Virginia, in Deed Book _____, Page _____, or Instrument _____, and has not been revoked.

Attorney-in-Fact

**AFFIDAVIT AND ACKNOWLEDGEMENT OF ATTORNEY-IN-FACT
COMMONWEALTH OF VIRGINIA**

(or, alternatively, Commonwealth or State of _____) CITY/COUNTY OF _____, to wit:

I, the undersigned notary public, do certify that _____ personally appeared before me in the jurisdiction aforesaid and made oath that he/she is the attorney-in-fact of _____, the Surety, that he/she is duly authorized to execute on its behalf the foregoing Bond pursuant to the Power of Attorney noted above, and on behalf of said Surety acknowledged the aforesaid Bond(s) as its act and deed.

Given under my hand this _____ day of _____, 20__.

Notary Public (SEAL)

My Commission expires: _____, 20__.

III. BY ISSUING AGENT: 1. Attach copy of Agency License and Assignment Card from Bureau of Insurance.

2. Attach verification of individual's authority to sign on behalf of Agency.

Insurance Agency Issuing Surety Bond (provide the following information):

Agency name: _____

Authorized agent: _____

Agent address: _____

Office telephone number: _____

IV. DIVISION APPROVAL:

ACCEPTED: _____ Date _____

Division of Mineral Mining