

OHIO DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL AND GAS RESOURCES MANAGEMENT  
ATTN: WASTE FACILITY PROGRAM  
2045 MORSE RD, BLDG F-2  
COLUMBUS, OH 43229-6693

BOND NUMBER: \_\_\_\_\_

### SURETY BOND (Waste Facility)

KNOW ALL PERSONS BY THESE PRESENTS:

That we \_\_\_\_\_ of the City of \_\_\_\_\_  
County of \_\_\_\_\_ State of \_\_\_\_\_, as Principal,  
and \_\_\_\_\_  
(Surety) (Address)

as surety, are hereby held and firmly bound unto the State of Ohio as Obligee(s), in the amount of \_\_\_\_\_  
to payment whereof the Principal and Surety bind themselves, their heirs, executors, administrators, successors and assigns jointly and  
severally, firmly by these present.

WHEREAS, the above named Principal has applied or intends to apply with the Chief of the Division of Oil and Gas Resources  
Management, Department of Natural Resources, State of Ohio for an oil and gas waste facility permit under Chapter 1509 of the Ohio  
Revised Code.

NOW, THEREFORE, THE CONDITIONS OF THIS OBLIGATION ARE SUCH, that if the Principal herein shall comply fully with  
Chapter 1509 of the Ohio Revised Code, all amendments thereto, and all rules and orders of the Chief relating thereto, including the  
filing of all required reports, then this obligation shall be null and void, otherwise to remain in full force and effect.

The duration of this bond shall be from the time filed with the Division of Oil and Gas Resources Management until the Chief is  
satisfied that the requirements of Chapter 1509 of the Revised Code, Division 1501:9 of the Administrative Code, and all rules and  
orders issued pursuant to either are fulfilled.

IN WITNESS WEREOF, we hereunto set our hand and affixed our signature this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
PRINCIPAL (PLEASE PRINT NAME)

\_\_\_\_\_  
SURETY

\_\_\_\_\_  
PRINCIPAL (SIGNATURE)

\_\_\_\_\_  
SURETY (SIGNATURE)

STATE OF OHIO  
COUNTY OF \_\_\_\_\_, ss:

STATE OF OHIO  
COUNTY OF \_\_\_\_\_, ss:

The foregoing bond was acknowledged before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

The foregoing bond was acknowledged before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_,  
on behalf of \_\_\_\_\_  
(Circle the appropriate: Self, Attorney-in-Fact, Partnership, Corporation)

By \_\_\_\_\_,  
on behalf of \_\_\_\_\_  
(Authorized Agent)

\_\_\_\_\_  
NOTARY PUBLIC  
(SEAL)

\_\_\_\_\_  
NOTARY PUBLIC  
(SEAL)

Date Commission Expires

Date Commission Expires

A CERTIFICATE OF COMPLIANCE, SIGNED BY THE SUPERINTENDENT OF INSURANCE OF OHIO, MUST BE ATTACHED TO THIS BOND. WHEN THE  
PRINCIPAL OR SURETY EXECUTES THIS BOND BY AGENT, POWER OF ATTORNEY OR OTHER EVIDENCE OF AUTHORITY MUST BE ATTACHED.