

BOND NO. _____

PERFORMANCE BOND

Contractor Name _____

Contractor Principal Business Address _____

Contractor Telephone No. (_____) _____

Surety Name _____

Surety Principal Business Address _____

Surety Telephone No (_____) _____

Owner of Property Being Improved: _____

Hillsborough County Board of County Commissioners

Attn: Procurement Services Department

P.O. Box 1110

Tampa, FL 33601

Telephone No. (813) 272 - 5790 _____

Contracting Public Entity (if different from Owner) _____ (N/A)

Contract Number Assigned by Public Entity (BOCC No.) _____

(Bid No.) IFB-26-00263 _____

Description of Project (including if applicable, a legal description and the street address of the property being improved and a general description of the improvement):

[] See Attachment ("Legal Description")

Hillsborough County Capital Programs requires a qualified Contractor to provide construction of approximately 2,910 square feet of interior space in the First Floor Security Lobby. This includes expansion of lobby area, new storefront at elevator lobby, new offices, security room, and expansion of existing offices and related demolition at the Southeast area of the first floor 700 E. Twiggs Street, Tampa, Florida 33602

PERFORMANCE BOND

I. KNOW ALL PERSONS BY THESE PRESENTS: That _____,
as Principal, and _____, as Surety,
located at _____
(Business Address)

are held and firmly bound unto the Board of County Commissioners, Hillsborough County, Florida, as Obligee in the sum of \$_____ for the payment whereof we bind ourselves, our heirs, executors, personal representatives, successors and assigns, jointly and severally, firmly by these presents.

II. WHEREAS, Principal has entered into a contract dated the _____ day of _____, 20____, with Obligee for IFB-26-00263 Public Defender First Floor Security Lobby in accordance with drawings and specifications, which contract is by reference made a part hereof, and is hereinafter referred to as the Contract.

III. THE CONDITION OF THIS BOND is that if Principal:

1. Performs the contract at the times and in the manner prescribed in the contract, and
2. Pays Obligee any and all losses, damages, including delay damages, costs and attorneys fees that Obligee sustains because of any default by Principal under the contract, and
3. Performs the guarantee of all work and materials furnished under the contract applicable to the work and materials, then this bond is void; otherwise it remains in full force.

The Surety, for value received, hereby stipulates and agrees that no changes, extensions of time, alterations or additions to the terms of the Contract or other work to be performed hereunder, or the specifications referred to therein shall in anywise affect its obligation under this bond, and it does hereby waive notice of any such changes, extension of time, alterations or additions to the terms of the Contract or to work or to the specifications.

In no event shall the Surety be liable in the aggregate to Obligee for more than the penalty of its Performance Bond regardless of the number of suits that may be filed by Obligee.

THIS BOND DATED THIS ____ day of _____, 20__ .

ATTEST:

PRINCIPAL:

Witness

BY: _____ (SEAL)
Authorized Signature (Principal)

Witness

Printed Name

Title of Person Signing Above

-OR-

Witness

BY: _____ (SEAL)
As Attorney in Fact (Attach Power)

Witness

Printed Name

Business Address

(_____) _____
Business Telephone

STATE OF _____)

COUNTY OF _____)

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online

notarization this ____ day of _____, 20__, by _____ as
(Name of person)

_____ for _____.
(ie. Officer, attorney in fact) (Name of party on behalf of whom instrument was executed.)

(Signature of Notary Public)

(Print, Type, or Stamp Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____

ATTEST:

Witness

Witness

Witness

Witness

COUNTERSIGNED (if applicable):

Signed

()
Agent's License No. Phone

STATE OF _____)

COUNTY OF _____)

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____, 20____, by _____ as
(Name of person)

_____ for _____
(ie. Officer, attorney in fact) (Name of party on behalf of whom instrument was executed.)

(Signature of Notary Public)

Personally Known OR Produced Identification
Public)

(Print, Type, or Stamp Name of Notary

Type of Identification Produced _____

SURETY: _____
(Printed Name)

Business Address

BY: _____ (SEAL)
Authorized Signature

Printed Name

-OR-

BY: _____ (SEAL)
As Attorney in Fact (Attach Power)

Printed Name

Agent's License No.

Agency Name

Agency Mailing Address

()
Agency Telephone No.

()
Agency Fax No.