

UNIVERSITY SERVICES

Sixth Avenue and Grant Street • PO Box 172760 • Bozeman, Montana 59717-2760
Phone: (406) 994-5413 • Fax: (406) 994-5665

CONSENT OF SURETY

| Project: | | |
|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Location: PPA No. | Montana State University | |
| Unive | cana State University ersity Services & Grant, PO Box 172760 man, Montana 59717-2760 | |
| Contractor: | | Contract Date: |
| | ce with the provisions of the Contract and address of Surety Company) | between the Owner and the Contractor as indicated above, the |
| on bond of (| here insert name and address of Contractor) | ,Surety Company, ,Contractor, |
| relieve the S Company's Contractor. Completion from the date Completion | Surety Company of any of its obligation bond. The Surety agrees to be bout The warranty is defined as commentation if there is more than one) of the Project | ractor, and agrees that final payment to the Contractor shall not ons to State of Montana, Owner, as set forth in the said Surety and to the warranty period under the same conditions as the noting with Substantial Completion (or with each Substantial t, or any portion thereof, and continuing for one (1) calendar year ect unless otherwise modified in writing as part of the Substantial |
| the Surety C | company has hereunto set its hand this | Day of, |
| | | Surety Company |
| | | Signature of Authorized Representative |
| Attest: (Seal) | | Title |