

POLK COUNTY LAND DEVELOPMENT
330 W. CHURCH ST., BAROW, FL 33830
P.O.B. 9005, DRAWER GM 03
BARTOW, FL. 33831-9005
PHONE: (863) 534-6792 FAX: (863) 534-5908



WARRANTY INSPECTION FORM

Subdivision Name: The Glen at West Haven – LDSUR-2022-12	
Road Name:	
Engineering Firm / Engineer of Record: James Askey, P.E. – Askey Hughey Inc.	
Contractor:	
Roadway Items	Condition / Remarks
A. Asphalt	
B. Shoulders:	
C. Curbs:	
D. Inlets:	
E. Mitered Ends:	
F. Swales:	
G. Sidewalks:	
H. Landscaping:	
Drainage Items	Condition / Remarks
A. Retention Ponds:	
B. Drainage	
C. Perimeter Swales:	
Utility Items:	Condition / Remarks
A. Amount Security: \$241,971.08	
B. Potable Water: Based on field inspections it appears the potable water system is functioning per design. No deficiencies identified	
C. Wastewater System:	
Inspector: Tim Bearden	
Date: 10/31/2023	

RESIDENTIAL MAINTENANCE BOND

Bond No. 800140610

KNOWN ALL MEN BY THESE PRESENTS, That we, Ashton Orlando Residential, LLC, as Principal, and Atlantic Specialty Insurance Company, a corporation organized and doing business under and by virtue of the laws of the State of New York and duly licensed to conduct surety business in the State of Florida, as Surety, are held and firmly bound unto Polk County, a political subdivision of the State of Florida, as Obligee, in the sum of Two Hundred Forty One Thousand Nine Hundred Seventy One* (\$ 241,971.08) Dollars, for which payment, well and truly to be made, we bind ourselves, our heirs, executors and successors, jointly and severally firmly by these presents.

WHEREAS, Polk County’s Land Development Code (hereinafter “LDC”) is by reference incorporated into and made part of this Maintenance Bond (hereinafter “Bond”); and

WHEREAS, the Principal has constructed the improvements described in the Engineer’s Cost Estimate, attached hereto as Exhibit “A” and incorporated into and made part of this Bond (hereinafter “Improvements”), in the The Glen at West Haven subdivision, in accordance with the drawings, plans, specifications, and other data and information (hereinafter “Plans”) filed with Polk County’s Land Development Division, which Plans are by reference incorporated into and made part of this Bond; and

WHEREAS, the Principal wishes to dedicate the Improvements to the public; and

WHEREAS, the LDC requires as a condition of acceptance of the Improvements that the Principal provide to the Obligee a bond warranting the Improvements for a definite period of time following the Obligee’s final acceptance of said Improvements.

NOW, THEREFORE, the conditions of this Bond are such that:

1. If the Principal shall warrant and indemnify for a period of One (1) year(s) following the date of the Obligee’s acceptance of the Improvements (the “Warranty Period”) in the approved platted subdivision known as The Glen at West Haven, against all loss that Obligee may sustain resulting from defects in construction, design, or materials; and
2. If the Principal shall correct within the Warranty Period any failure, deterioration, or damage existing in the Improvements so that the Improvements thereafter comply with the technical specifications contained in the LDC;

Then upon approval by the Obligee this Bond shall be void, otherwise to remain in full force and effect.

* and 08/100

Initials _____

3. All notices, demands, and correspondence with respect to this Bond shall be in writing and addressed to:

The Surety at:

Atlantic Specialty Insurance Company
605 Highway 169 North
Suite 800
Plymouth, MN 55441

The Principal at:

Ashton Orlando Residential, LLC
1064 Greenwood Blvd., Ste. 124
Lake Mary, FL 32746

The Obligee at:

Polk County, Land Development Division
330 West Church Street
PO Box 9005 – Drawer GM03
Bartow, FL 33831-9005

[Signatures appear on the next page]

IN WITNESS WHEREOF, the Principal and Surety have caused this Bond to be executed by their duly authorized officers this 7th day of June, 2022.

Christina M. Lee
Witness
CHRISTINA M. LEE

Printed Name

[Signature]
Witness

Bob Willets
Printed Name

Diane M. Rubright
Witness

Diane M. Rubright
Printed Name

Alexa Costello
Witness

Alexa Costello
Printed Name

PRINCIPAL:

Ashton Orlando Residential, LLC
Name of Corporation

By: [Signature]

Jack Trayner
Printed Name

Title: **Authorized Representative**
(SEAL)

SURETY:

Atlantic Specialty Insurance Company
Name of Corporation

By: [Signature]

Stephen Kazmer
Printed Name

Title: Attorney-in-Fact
(SEAL)

(Attach power of attorney)





Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: **Kelly A. Gardner, Jennifer J. Mc Comb, James Moore, Stephen Kazmer, Dawn L. Morgan, Melissa A. Schmidt, Amy Wickett**, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: **unlimited** and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

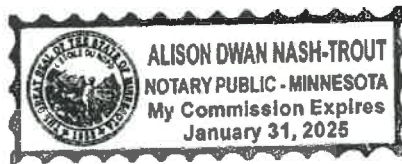
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-seventh day of April, 2020.



By 
Paul J. Brehm, Senior Vice President

STATE OF MINNESOTA
HENNEPIN COUNTY

On this twenty-seventh day of April, 2020, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.




Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 7th day of June, 2022.

This Power of Attorney expires
January 31, 2025




Kara Barrow, Secretary

State of Illinois }
 } ss.
County of DuPage. }

On June 7, 2022, before me, Diane M. Rubright, a Notary Public in and for said County and State, residing therein, duly commissioned and sworn, personally appeared, Stephen Kazmer, known to me to be Attorney-in-Fact of Atlantic Specialty Insurance Company, the corporation described in and that executed the within and foregoing instrument, and known to me to be the person who executed the said instrument in behalf of the said corporation, and he duly acknowledged to me that such corporation executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year stated in this certificate above.

My Commission Expires March 23, 2023



Diane M. Rubright, Notary Public

Commission No. 817036



STATE OF FLORIDA)
COUNTY OF SEMINOLE)

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 9th day of June, 2022 by Jack Traynor as Authorized Representative of Ashton Orlando Residential, L.L.C., a Nevada limited liability company, on behalf of the company, who is personally known to me or who has produced _____ as identification.

Christina M. Lee

Notary Public

My Commission expires: _____

