

~~File Number:~~

Attention: Susan Johnson DNR

Email: Susan.Johnson@dnr.iowa.gov

APPLIANCE DEMANUFACTURING SURETY BOND

Surety's Bond No.: 2645191

Principal: Samson Development 204 Main Street, Peterson, IA 51047
(legal name and business address of owner or operator)

Type of Organization: _____
("individual," "joint venture," "partnership," or "corporation")

State of Incorporation: IA

Surety(ies): West Bend Insurance Company, 1900 S 18th Ave, West Bend, WI 53095-8796
(name(s) and business address(es))

Solid waste permit number, name, address, and current closure cost estimate, or portions thereof, for which each solid waste management facility guaranteed by this bond: _____

None, Household Hazardous Waste (Regional Collection Center)

3101 West 18th St, Spencer, IA 51301

3,500.00

Total penal sum of bond: \$ 3,500.00

KNOW ALL PERSONS BY THESE PRESENTS, That we, the Principal and Surety(ies) hereto are firmly bound to the State of Iowa, as Obligee, in the above penal sum for the payment of which we bind ourselves, our respective heirs, executors, administrators, successors, and assigns, jointly and severally; provided that, where the Surety(ies) are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" only for the purpose of allowing a joint action or actions against any or all of us, and for all other purposes each Surety binds itself, jointly and severally with the Principal, for the payment of such sum only as is set forth opposite the name of such Surety, but if no limit of liability is indicated, the limit of liability shall be the full amount of the penal sum.

WHEREAS, said Principal is required, under Iowa Administrative Code 567 Chapter 118 (hereinafter Chapter 118) to have a permit in order to own or operate each solid waste management facility identified above; and

WHEREAS, said Principal has applied to said Obligee to operate a sanitary disposal project located within the State of Iowa and is required to provide financial assurance for closure care, as a condition of the permit and applicable laws, rules and regulations;

NOW, THEREFORE, THE CONDITON OF THIS OBLIGATION IS SUCH that if the Principal shall faithfully, before the beginning of final closure of each facility identified above, fund an account for the benefit of the Obligee in the amount(s) identified above for each facility, if said Principal fails to properly close the site within 30 days of permit suspension, termination, revocation or expiration. The Principal shall fully indemnify and hold harmless the Obligee against all loss to it caused by said Principal's breach of any ordinance, rule or regulation relating thereto, then this obligation shall be null and void; otherwise it shall remain in full force and effect.

Or, if the Principal shall provide alternate financial assurance, as specified in Chapter 118, as applicable, and submit documentation of such alternate assurance, within 60 days of receipt of a written notice of cancellation is received by both the Principal and the Obligee from the Surety(ies), then this obligation shall be null and void, otherwise it is to remain in full force and effect.

PROVIDED, THE LIABILITY OF THE SURETY shall become liable on this bond obligation only when the Principal has failed to fulfill the conditions described above. Upon notification by the Obligee that the Principal has failed to perform as guaranteed by this bond, the Surety(ies) shall place funds in the amount guaranteed for the facility(ies) into an account as directed by the Obligee.

The liability of the Surety(ies) shall not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments shall amount in the aggregate to the penal sum of the bond, but in no event shall the obligation of the Surety(ies) hereunder exceed the amount of said penal sum.

The Surety(ies) may cancel the bond by sending notification by certified mail, return receipt requested, to the Principal and the Obligee, provided, however, that cancellation shall not occur during the 90 days beginning on the date of receipt of the notice of cancellation by both the Principal and the Obligee, as evidenced by the return receipts; and provided further, that nothing herein shall affect any rights or liabilities which shall have accrued under this bond prior to the date of such termination.

The Principal may terminate this bond only if the Principal substitutes alternate financial assurance prior to cancellation, or if said Principal is no longer required to demonstrate financial responsibility in accordance with Chapter 118.

IN WITNESS THEREOF, the Principal and Surety(ies) have executed this financial instrument under their respective hands and seals, this 17th day of April, 2025.

The persons whose signatures appear below hereby certify that they are authorized to execute this surety bond on behalf of the Principal and Surety(ies).

Samson Development

Principal

[Corporate Seal]

Signature: [Signature]

Name: Andrew Sampson

Title: Owner

Signature: _____

Name: _____

Title: _____

West Bend Insurance Company

Corporate Surety(ies)

[Corporate Seal]

Signature: [Signature]

Name: Rhonda Thompson

Title: Attorney-in-fact

Signature: _____

Name: _____

Title: _____

State of Incorporation: Wisconsin



Bond No. 2645191

POWER OF ATTORNEY

Know all men by these Presents, that West Bend Insurance Company (formerly known as West Bend Mutual Insurance Company prior to 1/1/2024), a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

Rhonda Thompson

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of: Three Thousand Five Hundred Dollars and Zero Cents 3,500.00

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Insurance Company by unanimous consent resolution effective the 1st day of January 2024.

Appointment of Attorney-In-Fact. The president or any vice president, or any other officer of West Bend Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

Any reference to West Bend Mutual Insurance Company in any Bond and all continuations thereof shall be considered a reference to West Bend Insurance Company.

In witness whereof, West Bend Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 1st day of January 2024.

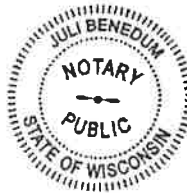
Attest Christopher C. Zwygart
Christopher C. Zwygart
Secretary



Robert J. Jacques
Robert J. Jacques
President

State of Wisconsin
County of Washington

On the 1st day of January 2024, before me personally came Robert Jacques, to me known being by duly sworn, did depose and say that he is the President of West Bend Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.



Juli Benedum
Lead Corporate Attorney
Notary Public, Washington Co., WI
My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this 17th day of April, 2025



Christopher C. Zwygart
Christopher C. Zwygart
Secretary