

# SURETY BOND RIDER

Reference: Facility name: \_\_\_\_\_ FDEP I.D. Number: \_\_\_\_\_

To be attached to and form part of \_\_\_\_\_ bond number \_\_\_\_\_, originally effective on \_\_\_\_\_, for \_\_\_\_\_, as Principal, and \_\_\_\_\_, as Surety(ies), in favor of the Florida Department of Environmental Protection (FDEP), as Obligee. It is understood and agreed that the bond is amended as follows:

(Check appropriate boxes below and complete.)

- Increase Penal Sum from \$ \_\_\_\_\_ to \$ \_\_\_\_\_.
- Decrease\* Penal Sum, as authorized by letter dated \_\_\_\_\_, from \$ \_\_\_\_\_ to \$ \_\_\_\_\_.
- Change facility amounts\* – \_\_\_\_\_ : \$ \_\_\_\_\_  
(use this section only when bond covers multiple facilities) Facility name New facility amount
- \_\_\_\_\_ : \$ \_\_\_\_\_  
Facility name (use 'Other' section for additional facilities) New facility amount

\* - Reductions of Penal Sum or Facility Amounts, in accordance with the terms of the bond and FDEP regulations, require prior written permission from the FDEP Tallahassee office. Authorization will be addressed to Surety or Surety's representative and will specify bond to be changed.

- Change \_\_\_\_\_ name from \_\_\_\_\_  
"principal" or "facility" to \_\_\_\_\_.
- Change Co-surety Liability Limits to \$ \_\_\_\_\_ for \_\_\_\_\_  
Surety Company and \$ \_\_\_\_\_ for \_\_\_\_\_  
Surety Company (use 'Other' section for additional Sureties).
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Said Bond shall be subject to all its terms, conditions and limitations, except as herein expressly amended. This rider shall become effective on \_\_\_\_\_. This rider is executed on \_\_\_\_\_. IN WITNESS WHEREOF,

\_\_\_\_\_  
Surety Company(ies)

has caused its corporate seal to be hereunto affixed.

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

\_\_\_\_\_  
Signature of Authorized Representative of Principal

\_\_\_\_\_  
Signature of Authorized Representative of Surety (Affix Surety Seal and Attach Power of Attorney)

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Type Name

\_\_\_\_\_  
Address of Authorized Representative (including Agency Name)

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail Address