

**County of Fairfax**  
**Board of Supervisors c/o Clerk to the Board of Supervisors**  
**12000 Government Center Parkway**  
**Suite 533**  
**Fairfax, Virginia 22035**

**Solid Waste Disposal Bond**

BOND NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_, 20\_\_\_\_

**KNOW ALL MEN BY THESE PRESENTS, That** \_\_\_\_\_, principal, and \_\_\_\_\_, surety, are held and firmly bound unto the Board of Supervisors of Fairfax County, Virginia, and its assigns in the sum of \_\_\_\_\_ Dollars (\$\_\_\_\_\_) for the payment whereof, well and truly to be made, for which we, the said principal and surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents:

**WHEREAS**, the said principal has applied for a solid waste disposal permit (“permit”) under Section 109.1-4-8 of The Code of the County of Fairfax, Virginia, to engage in the business of disposal of solid waste in Fairfax County, Virginia; and

**WHEREAS**, the said permit contains certain conditions and requirements that Chapter 109.1 of The Code of the County of Fairfax, Virginia (“Chapter 109.1”), sets forth for the disposal of solid waste in Fairfax County, Virginia; and

**WHEREAS**, it is the desire of the principal and surety hereunder to guarantee to the Board of Supervisors of Fairfax County, Virginia, that the principal meets the terms and conditions set forth in the said permit and that the requirements of Chapter 109.1 be met.

**NOW THEREFORE IT IS HEREBY AGREED THAT:**

1. This bond is required under Section 109.1-4-9 of The Code of the County of Fairfax, Virginia, for the principal to obtain the above-mentioned permit for the disposal of solid waste in Fairfax County.

2. The principal and surety are jointly and severally liable for the principal’s obligations under Chapter 109.1 and the permit.

3. The principal and surety agree to compensate, indemnify and hold harmless the Board of Supervisors of Fairfax County, Virginia, as well as any person, firm or corporation, for all fees, charges, expenses, or damages that may be incurred by the principal’s failure to comply with the provisions of Chapter 109.1 and the permit.

4. The condition of this bond is that, if the principal shall in every respect perform all of its obligations under Chapter 109.1 and the permit, the surety will not have any liability under this bond.

5. The liability of the surety hereunder, but not of the principal, will not exceed the amount of this bond.

6. The surety agrees to address all routine correspondence and inquiries regarding the bond to Director, Solid Waste Management Program, 12000 Government Center Parkway, Suite 458, Fairfax, VA 22035.

7. The official mailing address will be Board of Supervisors, Fairfax County, Virginia, c/o Clerk to the Board of Supervisors at the letterhead address of this Bond.

8. This bond shall be deposited with the Director of the Fairfax County Department of Public Works and Environmental Services, or his designee, and shall be in full force and effect until \_\_\_\_\_.  
(Date)

Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_(SEAL)

Principal

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_, to wit:-

I, \_\_\_\_\_, a Notary Public in and for the State and County aforesaid, do certify that \_\_\_\_\_, the above-named PRINCIPAL, whose name is signed to the writing above bearing date on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, has acknowledged the same before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Notary Registration Number: \_\_\_\_\_

Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_(SEAL)

Surety

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_, to wit:-

I, \_\_\_\_\_, a Notary Public in and for the State and County aforesaid, do certify that \_\_\_\_\_, the above-named SURETY, whose name is signed to the writing above bearing date on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, has acknowledged the same before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Notary Registration Number: \_\_\_\_\_