



ROAD BOND

999386660

KNOW ALL MEN BY THESE PRESENTS, that we, Walker Operating Company

2831 Bledsoe St, Fort Worth, TX 76107

(hereinafter called the Principal), and The Ohio Casualty Insurance Company
175 Berkeley Street, Boston, Massachusetts 02116

(hereinafter called the Surety), are held and firmly bound unto Navarro County

300 W 3rd Ave, County Clerks Office, Corsicana, TX 75110

(hereinafter called the Obligee), in the full and just sum of \$100,000.00
(One Hundred Thousand Dollars And Zero Cents

),
lawful money of the United States, for the payment of which, well and truly to be made, we bind ourselves, our heirs, and administrators, executors, successors and assigns, jointly and severally, firm by these presents.

WHEREAS, the above named Principal has made application and may make further application to the Obligee for permission to move or cause to be moved vehicles and/or equipment of various types over certain of the Obligee's roads as described in the application or applications, and as a condition precedent to granting such permission, the Obligee has required the furnishing of a bond.

NOW, THEREFORE, the condition of the above obligation is such that if the above named Principal shall move the vehicles and/or equipment described in any and/or all of the applications filed by the above named Principal on and after the date of the execution of this obligation over the Obligee's roads, bridges, and culverts in the manner designated by and with the permission of said Obligee, and shall well and truly pay for all damages to said roads (including wearing surface, base, road shoulders and berms), bridges, culverts, ditches, traffic control devices, intersections and any other structures and features thereof or related thereto which are and/or may be caused by the movement of such vehicles and/or equipment by the named Principal or his authorized agent, over road(s) of the Obligee and all there from, and any fines or penalties to which the said Principal or his authorized agent become liable to pay, and shall save the Obligee harmless in and/or from any and all suits, claims for damages and/or proceedings arising out of the movement of any of said vehicles and/or equipment over said roads, bridges, and culverts, and shall observe all terms and conditions of the permission granted to said Principal on and after this date of this obligation, then this obligation to be void; otherwise to remain in full force and effect in law.

PROVIDED HOWEVER, that the said Surety may cancel this bond at any time by giving THIRTY (30) days notice in writing, by Registered United States Mail, addressed to the Obligee, and that THIRTY DAYS AFTER the actual receipt by the Obligee of such written notice, the Surety's further liability shall be terminated,

provided, however, that the service of such written notice shall not be construed to waive, release or forego any obligations which may have arisen prior to the effective date of such written notice.

LET IT FURTHER be understood that in no event shall the aggregate liability of the Surety exceed the penal amount herein states.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 26th
day of February, 2025.

Walker Operating Company

John Wagar
Witness as to Principal

Brad Baker
Principal
The Ohio Casualty Insurance
Company
Surety

BY: Lindsay Senior
Attorney-in-Fact
Lindsay Senior



EFFECTIVE DATE: February 26, 2025

EXPIRATION DATE: February 26, 2026



POWER OF ATTORNEY

The Ohio Casualty Insurance Company

Principal: Walker Operating Company
Agency Name: Higginbotham Insurance Agency, Inc. Bond Number: 999386660
Obligee: Navarro County
Bond Amount (\$100,000.00) One Hundred Thousand Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint Lindsay Senior in the city and state of Fort Worth, TX, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 1st day of August, 2024.



The Ohio Casualty Insurance Company

By:

Nathan J. Zangerle, Assistant Secretary

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 1st day of August, 2024, before me personally appeared Nathan J. Zangerle, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
Teresa Pastella, Notary Public
Montgomery County
My commission expires March 28, 2029
Commission number 1126044
Member, Pennsylvania Association of Notaries

By:

Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes Nathan J. Zangerle, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 26th day of February, 2025.



By:

Renee C. Llewellyn, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.



Figure: 28 TAC § 1.601(a)(2)(B)

Have a complaint or need help?

If you have a problem with a claim or your premium, call your insurance company or HMO first. If you can't work out the issue, the Texas Department of Insurance may be able to help.

Even if you file a complaint with the Texas Department of Insurance, you should also file a complaint or appeal through your insurance company or HMO. If you don't, you may lose your right to appeal.

The Ohio Casualty Insurance Company

To get information or file a complaint with your insurance company or HMO:

Call: Liberty Mutual Surety Claims **at** 206-473-6700

Online: <https://claims-intake.libertymutualsurety.com>

Email: HOSCL@libertymutual.com

Mail: P.O. Box 34526 Seattle, WA 98124

The Texas Department of Insurance

To get help with an insurance question or file a complaint with the state:

Call with a question: 1-800-252-3439

File a complaint: www.tdi.texas.gov

Email: ConsumerProtection@tdi.texas.gov

Mail: Consumer Protection, MC: CO-CP Texas Department of Insurance,
P.O. Box 12030, Austin, TX 78711-2030

¿Tiene una queja o necesita ayuda?

Si tiene, un problema con una reclamación o con su prima de seguro, llame primero a su compañía de seguros o HMO. Si no puede resolver el problema, es posible que el Departamento de Seguros de Texas (Texas Department of Insurance, por su nombre en inglés) pueda ayudar.

Aun si usted presenta una queja ante el Departamento de Seguros de Texas, también debe presentar una queja a través del proceso de quejas o de apelaciones de su compañía de seguros o HMO. Si no lo hace, podría perder su derecho para apelar.

The Ohio Casualty Insurance Company

Para obtener información o para presentar una queja ante su compañía de seguros o HMO:

Llame a: Liberty Mutual Surety Claims

al 206-473-6700

En línea: <https://claims-intake.libertymutualsurety.com>

Correo electrónico: HOSCL@libertymutual.com

Dirección postal: P.O. Box 34526 Seattle, WA 98124

El Departamento de Seguros de Texas

Para obtener ayuda con una pregunta relacionada con los seguros o para presentar una queja ante el estado:

Llame con sus preguntas al: 1-800-252-3439

Presente una queja en: www.tdi.texas.gov

Correo electrónico: ConsumerProtection@tdi.texas.gov

Dirección postal: Consumer Protection, MC: CO-CP Texas Department of Insurance, P.O. Box 12030, Austin, TX 78711-2030