

Name of Company:

Kand K Earthmoving, Inc.

Pre-Qualification Category

Second Opinion



Excavation



Special



Attach copies of the following documents:

1. License Number
2. Bond letter stating limits for single project and aggregate program
3. (Corp. or LLC Only) Corporate authority and/or proof of registry with the Secretary of State to do business in Indiana

Principal Place of Business:

50918 CR 35  
Bristol, IN 46507

Mailing Address:

Same

Telephone:

(514) 389-9001

Cell:

(514) 535-3160 ( )

Fax:

E-Mail:

Kandkearthmoving@gmail.com

Ownership Information

(Identify all owners if the Company, if applicable)

Robert R. Kindel Jr.

Nature of Company's Business

(Briefly describe the type of services your company provides)

(Provide references as needed to validate experience for specific pre-qualification)

excavation work for sewer, water repairs.

OSHA Competent Person Certification

(Name of holder, expiration date)

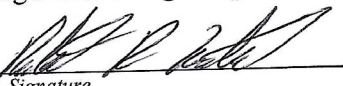

OSHA Confined Space Training Certification

(Name of holder, expiration date)

<b>License Information</b> (Name of holder, license type, number)	Doesn't apply		
<b>Equipment On Hand</b> (Provide proof of ownership and list of equipment owned by company for use in determination of pre-qualification)	<u>Excavator's</u> Cx 160 Dx 140 Kx 80 Kx 55 Kx 08	<u>Loader</u> 2-Su 97	vac truck 2 dump truck mini dump Semi dump

By signing and submitting this application, I/we agree to follow all City of South Bend Prevailing Specifications and Special Provisions (enclosed in the Sewer Insurance Program Policy as Exhibit G)

By signing and submitting this application for pre-qualification, I/we understand that as a Contractor under the City Sewer Insurance Program, I/we shall be directly and solely liable to a Homeowner for any damage to any Homeowner's person or property caused by the Contractor's acts, conduct or omissions arising from or within the scope of this Program. I/we shall release and fully indemnify the City from any claim or cause of action of any kind which Homeowner may make against the City for any act, conduct or omission by the Contractor under this Program. Indemnification includes but is not limited to Contractor's payment of any legal fees or legal expense incurred by the City in defending such Homeowner claim.

 _____ Signature	_____ Signature	_____ Signature
 _____ Title	_____ Title	_____ Title
12-18-25 _____ Date	_____ Date	_____ Date

\*\*\*

I hereby affirm under the penalties of perjury that the facts and information contained in the foregoing bid for public works are true and correct.

Dated this 18<sup>th</sup> day of December, 2025



**TIFFANY BURNS**  
Notary Public, State of Indiana  
Elkhart County  
Commission Number NP0751251  
My Commission Expires  
August 29, 2031

Kand K Earth moving Inc  
Contractor/Bidder (Firm)

[Signature]  
Signature of Contractor/Bidder or Its Agent

Robert R Kindel President  
Printed Name and Title

Subscribed and sworn to before me this 18<sup>th</sup> day of December, 2025

My Commission Expires 8-29-2031

Tiffany Burns  
Notary Public

County of Residence Elkhart

THE  
**CINCINNATI**  
INSURANCE COMPANY

CONTINUATION CERTIFICATE

Bond Number: CBE1024553  
Bond Amount: \$ 5,000.00

Principal:

K & K Earthmoving, Inc.  
50918 County Road 35  
Bristol, IN 46507-8510

Obligee:

City of South Bend  
227 W Jefferson Blvd Board Of Public Works  
South Bend, IN 46601

It is expressly understood and agreed that the subject bond and all renewal or continuation certificates attached thereto (including this one) are not cumulative, and that the total liability of THE CINCINNATI INSURANCE COMPANY under the attached bond and all such renewal or continuation certificates shall not exceed the penalty named in the subject bond.

This bond is extended to 01/31/2027

Signed and sealed this 11/3/2025



THE CINCINNATI INSURANCE COMPANY

*John Junker*

ATTORNEY-IN-FACT John Junker

Agency:

Hummel Group, Inc.  
34451  
PO BOX 250  
BERLIN, OH 44610-0250

BN-1003(3/97)

THE CINCINNATI INSURANCE COMPANY  
THE CINCINNATI CASUALTY COMPANY

Fairfield, Ohio

CBE1024553

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY and THE CINCINNATI CASUALTY COMPANY, corporations organized under the laws of the State of Ohio, and having their principal offices in the City of Fairfield, Ohio (herein collectively called the "Companies"), do hereby constitute and appoint

John Junker

of **Fairfield OH**  
their true and legal Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and deliver on behalf of the Companies as Surety, any and all bonds, policies, undertakings or other like instruments, as follows:

**Five Thousand Dollars \$ 5,000.00**

This appointment is made under and by authority of the following resolutions adopted by the Boards of Directors of The Cincinnati Insurance Company and The Cincinnati Casualty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the President or any Senior Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company.

RESOLVED, that the signature of the President or any Senior Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Vice-President and the Seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS WHEREOF, the Companies have caused these presents to be sealed with their corporate seals, duly attested by their President or any Senior Vice President this 16th day of March, 2021.



STATE OF OHIO )SS:  
COUNTY OF BUTLER )

THE CINCINNATI INSURANCE COMPANY  
THE CINCINNATI CASUALTY COMPANY

*Stephen A. Ventre*

On this 16th day of March, 2021 before me came the above-named President or Senior Vice President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, to me personally known to be the officer described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of said Companies and the corporate seals and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporations.



*Keith Collett*  
Keith Collett, Attorney at Law  
Notary Public - State of Ohio

My commission has no expiration date.  
Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Vice-President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, hereby certify that the above is the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Power of Attorney is still in full force and effect.

Given under my hand and seal of said Companies at Fairfield, Ohio, this **3rd** day of **November**, 2025.



*Ed H*