



SELF-INSURED BOND

(Type or Print Legibly)

AFFIDAVIT

STATE OF _____
(STATE)

COUNTY OF _____
(COUNTY)

I, _____, in my capacity as _____
(OFFICER NAME) (OFFICER TITLE)

of _____, a corporation or other business entity
(COMPANY OR ENTITY)

of the State of _____, hereby state under oath that I have personal knowledge that the net
assets in tangible property of said _____ are in excess of
(COMPANY OR ENTITY)

\$ _____ as shown in the financial information provided.
(NET TANGIBLE ASSETS)

Such corporation or entity is hereby requesting a self-insured bond recognized by the Kentucky
Transportation Cabinet in the amount of \$ _____.
(REQUESTED SELF-INSURED BOND AMOUNT)

BY: _____
(OFFICER NAME)

(OFFICER SIGNATURE)

SUBSCRIBED AND SWORN to before me a notary public in and for the County and State aforesaid,
this the _____ day of _____, 20____.
(DAY) (MONTH) (YEAR)

(NOTARY PUBLIC NAME)

(NOTARY PUBLIC SIGNATURE)

MY COMMISSION EXPIRES: _____
(DATE)



KENTUCKY TRANSPORTATION CABINET
 Department of Highways
DIVISION OF MAINTENANCE – PERMITS BRANCH

TC 99-08
 Rev. 05/2020
 Page 2 of 2

SELF-INSURED BOND

We, the undersigned _____, a corporation or entity existing under the laws of the State of _____, do hereby covenant to and with the Commonwealth of Kentucky that whenever the highway facilities or right-of-way, subject to the jurisdiction of the Commonwealth of Kentucky, is damaged by the reason, and to the extent, of the operation of the company (and excluding damage to the extent caused by the acts or omissions of parties other than the company or its agents or representatives) upon the right-of-way of any highway of the Commonwealth of Kentucky that any and all damage will be restored at the expense of the company within a reasonable time to as good a condition as it was prior to the damage thereof; that such work will be done in a workmanlike manner; that the company will take all necessary precautions to protect traffic; that the company will assume all responsibility for any and all damage that may result by reason of the granting of any permit by the Commonwealth for use of right-of-way of any highway of the Commonwealth of Kentucky; and that the company will make installations and restore disturbed right-of-way surfaces in accordance with permits and do all such work under the supervision of and as directed by engineers of the Kentucky Transportation Cabinet ("KYTC") of the Commonwealth of Kentucky.

This bond shall be and remain in full force and effect until either (a) release is granted or the bond is cancelled by the KYTC or (b) terminated by the undersigned company upon at least ninety days prior written notice to the KYTC. Notwithstanding the foregoing, no termination of the bond by the undersigned shall affect obligations arising before such termination including, without limitation and on an on-going basis, all obligations relating to any existing permits or projects referencing or relying upon this bond, until such time as such permits or projects are completed or closed and applicable bonded amounts under such permits or projects are individually released."

This _____ day of _____, 20____.
 (DAY) (MONTH) (YEAR)

ATTEST: _____ BY: _____
 (ATTESTER NAME) (OFFICER NAME)
 _____ (ATTESTER TITLE) _____ (OFFICER TITLE)
 _____ (ATTESTER SIGNATURE) _____ (OFFICER SIGNATURE)

CERTIFICATE **KYTC INDEMNITY #:**
 (To be completed by KYTC)

The KYTC hereby certifies that _____ (COMPANY OR ENTITY)
 of _____ engaged in the business of _____
 (COMPANY OR ENTITY ADDRESS) (BUSINESS ACTIVITY)
 at _____ being subject to the provisions of
 (LIST COUNTIES, KYTC DISTRICTS, OR STATEWIDE)

KRS 177.103 – 106 and KRS 416.140, has made proof to the satisfaction of the KYTC Department of Highways ("Department") that the permittee has the financial ability to pay direct the costs of removal and relocation of encroachments in the amount and manner and when due as provided in said statutes, and has filed with the Department acceptable assurances (affidavit, surety bond, etc.) to secure the payment of such costs of removal or relocation of encroachments as they are incurred.

KYTC approves the self-insured bond in the amount of \$ _____.
 (SELF-INSURED BOND AMOUNT)

This certificate shall be continuous except that it may be immediately cancelled by the KYTC upon violation of any of the requirements of the Permits Manual or the Manual on Uniform Traffic Control Devices.

Witness the KYTC, this _____ day of _____, 20____.
 (DAY) (MONTH) (YEAR)

ATTEST: _____ BY: **KENTUCKY TRANSPORTATION CABINET**
 (ATTESTER NAME) (STATE HIGHWAY ENGINEER NAME)
 _____ (ATTESTER TITLE) _____ (STATE HIGHWAY ENGINEER SIGNATURE)
 _____ (ATTESTER SIGNATURE) _____ (STATE HIGHWAY ENGINEER SIGNATURE)