Premium	
Requested:	
☐ 1 yr	
☐ 2 yrs	
☐ 3 yrs	

CNA SURETY

(Application Number)
Individual 🗀
Partnership 🗌
Corporation
Limited Liability Company

2 yrs				Partnership Corporation	
3 yrs PLEASE PRINT OR TYPE.	EASY APPLICAT	TION FOR BOI	NDS	Limited Liability Company Limited Liability Partnership	
Applicant(s) - Individual, partners, or oprincipal owner first. Attach additional For if more than three owners. EACH MUST \$	rm 10-E's and cross reference	Business or Corp	porate Name:	Limited Liability Partire(Ship	
in more than three ewhere. Each moor t	SIGN AT BOTTOM MIGHT.	Business Address	š		
1. Name		 			
Residence Address		Telephone #			
Telephone #		Number of Yea in this Business		Number of Years Licensed:	
Social Security No Married (spouse must sign at bottom right.) Does this applicant own real estate? Yes No		Type of Bond Requested:			
- N		Amount of Bon	d:	License No.	
2. Name Residence Address		Effective date:			
Residence Address		Lifective date.			
Telephone #		Entity requiring t	his bond (and add	lress):	
Social Security No	Married (spouse must sign at bottom right.)				
Does this applicant own real estate?	Yes No				
3. Name		Agent's recomme	endation/additiona	ıl comments:	
Residence Address		 			
Telephone #	Single	 			
Social Security No		 			
Does this applicant own real estate?		·			
The undersigned applicant and indemnitors hereby requ the above bond. The undersigned hereby certify the t including obtaining a credit report at the time of applicat reasonable discretion, and jointly and severally agree: (1) To pay the usual premiums, including renewal prer (2) To completely INDEMNIFY the Company from a by reason of having been surety on this bond under such bonds; regardless of whether such (3) To furnish the Company with satisfactory and conc (4) Upon demand by the Company for any reason of suretyship, (5) That the Company shall have the right to handle Company, shall be prima facie evidence of the fact (6) That the Company may decline to become surety of (7) That the Company shall, without notice, have the right (8) That if a contract or performance bond is issued deferred payments and retained percentage, suppl (9) At the Company's discretion, this indemnity agree jurisdiction of the courts of the State of South Da agreement, (10) That this indemnity may be cancelled as to subse date thereafter upon which the Company, co if amounts at the highest legal rate from the date suc	ruth of all statements in the application, aution, in any review or renewal, at the time of miums, to the Company or its agents, when of and against any liability, loss, cost, attorn or any other bond issued for applicant, liability, loss, costs, damages, attorneys' lusive termination evidence that there is no whatsoever, to deposit current funds with and extent of the liability of the undersigned on any bond and may cancel or amend any bight to alter the penalty, terms and conditions hereunder, the undersigned hereby assignies, tools, plants, equipment and materials of ment shall be governed in all respects by tkota and the United States District Court for quent liability by an indemnitor upon writter we cancelled all bonds in force for applicant, but the company interest on such	any potential or actual claim, due, neys' fees and expenses we or for the enforcement of fees and expenses are cal further liability on this bond of the Company in an amount. An itemized statement of lost to the Company, bond without cause and without cause and without or any bond issued for under the company any monifule or used on the Company any monifule or used on the Contract, the laws of the State of South or the District of South Dako	ify this information and to, or for any other legitimate whatsoever which the Cothis agreement, or in obused, or alleged to be cap any other bond issued from sufficient to satisfy any assent expense incurred but any liability which mighersigned, and this agreement in Dakota and the undersotatin all actions or processioux Falls, South Dakota	o obtain additional information from any source, e purposes as determined by the Company in its ompany shall at any time sustain as surety or obtaining a release or evidence of termination tused, by the negligence of the Company, or applicant, claim against the Company by reason of such by the Company, sworn to by an officer of the national apply to any such altered bond, becoming due under the contract, including all signed applicant and indemnitors consent to the edings arising from or relating to this indemnity	
] [
Agency			Signature & Busine	ss/Corporate Title "Indemnitor"	
Address				"Indemnitor"	
St	reet			"Indemnitor"	
City	State Zip	-			
Agent's Code —	,	NOTE: Personal inde	emnitors should sign th	neir names before the word "indemnitor".	

CNA SURETY

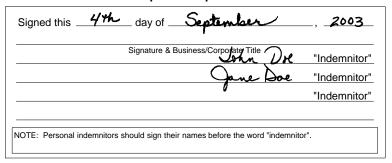
Check here if this correspondence was previously faxed.

See Guidelines on reverse side.

Guidelines for Signing a Form 10-E Easy Application for Bonds

We have examples showing five ways to sign an application.

1. Individual or Sole Proprietorship.



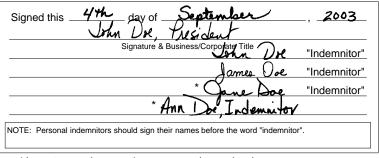
The individual or sole owner and spouse should sign at the bottom of the application before the word "Indemnitor".

2. Partnership.

Signed this 4th day of September	, <u>2</u> 003
Signature & Business/Corporate Title DK	"Indemnitor"
James Ooe	"Indemnitor"
Jane Doe	"Indemnitor"
Ann Doe, Indemnitor	
NOTE: Personal indemnitors should sign their names before the word "indemnitor"	

Each partner and his or her spouse should sign at the bottom of the application before the word "Indemnitor". If additional personal indemnity is required, the individual may sign their name and write the word "Indemnitor" after their name in their own handwriting.

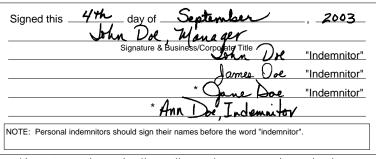
3. Corporation.



^{*} In most cases, the owners' spouses may also need to sign.

An officer should first sign on behalf of the corporation (indicating his/her corporate title) and then sign a second time as a personal indemnitor, before the word "Indemnitor". All other owners should also sign as personal indemnitors before the word "Indemnitor" on each line. In most cases, the owners' spouses also need to sign. If additional personal indemnity is required, the individual may sign their name and write the word "Indemnitor" after their name in their own handwriting.

4. Limited Liability Company or Partnership.



^{*} In most cases, the members'/owners'/partners' spouses may also need to sign.

An authorized manager, member, or partner should first sign on behalf of the Limited Liability Company or Partnership (indicating his/her company/partnership title) and then sign a second time as a personal indemnitor, before the word "Indemnitor". All other members/owners/partners should also sign as personal indemnitors before the word "Indemnitor" on each line. In most cases the members/owners/partners' spouses also need to sign. If additional personal indemnity is required, the individual may sign their name and write the word "Indemnitor" after their name in their own handwriting.

5. Outside Indemnity (Relatives, Friends).

Signed this 4th day of September	, <u>2</u> 003	
Signature & Business/Corpolate Title	"Indemnitor"	
Jane Doe	"Indemnitor"	
John Henry	"Indemnitor"	
Joseph Smith, Indemnitar		
NOTE: Personal indemnitors should sign their names before the word "indemnito	r".	

When outside indemnity is required, the proposed indemnitors should sign at the bottom of the application below the applicants' signatures before the word "Indemnitor". If additional personal indemnity is required, the individual may sign their name and write the word "Indemnitor" after their name in their own handwriting.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Credit Card Authorization Form

Full Name as listed on Credit Card:
Credit Card Number:
Credit Card:VisaMastercardDiscover (American Express not accepted)
CVS Security Code:
Expiration Date:
Credit Card Billing Address:
(street address)
(city, state, zip)
Your Phone Number:
Is your name on the bond? If not, what is the name is listed on the bond?
Full amount of payment: \$

Scan and email to bonds@sanguinettico.com, or fax to (209) 954-0800 or (877) 577-1722

Rick Mena

Sanguinetti & Co. Insurance Customer Service Sales Agent

Email: rmena@sanguinettico.com Website: <u>www.needabond.com</u>

Facebook: www.facebook.com/sanquinetti.marktwain