

Bond Application

1.) BOND INFORMATION

\$		
Bond Amount	Type of Bond Requested	Who is requiring the bond? (Obligee)

2.) BUSINESS INFORMATION

Business Name	Type: Individual, Partnership, Corp, LLC
Business Address	Years of Experience
City	Years in Business
Business Phone	License # (If applicable)
Email Address	

Has the business, or any other owner/applicant:

Been convicted of a crime?

Had License suspended, revoked or denied?

Been party to a surety bond claim?

If yes, check the box and provide explanation

3.) BUSINESS OWNER/INDEMNITOR INFORMATION

Owner Full Name	Title	Additional Owner Full Name	Title
Residence Street Address		Residence Street Address	
City	State	City	State
Social Security Number	Real Estate(Y/N)	Social Security Number	Real Estate(Y/N)
Married(Y/N)		Married(Y/N)	

4.) INDEMNITY AGREEMENT

I, the undersigned, hereby declare that the statements herein are true and correct. I hereby apply to the issuing Surety Company ("SURETY") for the Surety Bond ("bond") as described above. In consideration of the execution, renewal, assumption, continuation, or reissuance of a bond or bonds for the undersigned, or either of them (collectively, the "Undersigned"), the Undersigned promise and agree, jointly and severally, and as the owner or officer of the bonded entity to fully indemnify and hold SURETY harmless from and against any and all claims, claims adjusting expense, demands or legal expense ("Loss"), which arise by reason of the execution of any bond issued pursuant to this application. I understand that the SURETY shall have the right to settle any claim or suit in good faith and shall be binding on the undersigned. An itemized list of loss and expense incurred by SURETY shall be prima facie evidence of my liability to the SURETY. I agree to deposit with SURETY, upon demand, the amount of reserve posted against such Loss or potential loss as determined by SURETY in its sole discretion. SURETY shall be entitled to recover its reasonable attorneys' fees and costs of collection incurred in the enforcement of this Indemnity Agreement or collection of amounts due hereunder. I understand the bond is a credit relationship and hereby authorize SURETY and/or its authorized agents, to gather such credit, employment, DMV records, and business and personal financial information as considered necessary and appropriate for purposes of evaluating whether and at what premium rate such credit should be granted or continued. By signing, I am providing 'written instructions' to The Bond Exchange ("TBE") and the SURETY under the Fair Credit Reporting Act authorizing TBE to obtain information from my personal credit profile or other information from Experian. I authorize TBE to obtain such information solely to conduct a pre-qualification for credit. Upon approval to issue the bond, I agree to pay advanced premium as quoted for the first year or a fractional part thereof that is fully earned and annually thereafter as billed for suretyship. SURETY shall be under no obligation to execute, renew, or continue any bond, and shall have the absolute right to cancel the bond in accordance with the cancellation provision contained therein, or to procure its release under any law for the release of sureties, and SURETY is hereby released from any damage that may be sustained by reason of such actions. I agree that performance and any form of dispute resolution of this agreement shall take place in the county of SURETY's office of service. The obligations under this agreement may only be terminated by sending written notice to SURETY with notice taking effect twenty (20) days after receipt, but in no event shall such notice operated to modify, bar, or discharge the obligations contained herein as to bonds executed prior to the effective date of termination. This agreement shall survive any changes in, substitute to or renewal of any bond. A facsimile of this agreement shall be treated as an original for all purposes.

Signed this _____ day of _____, _____

Owner Signature	Spouses's Signature (If applicable)
Individually and On Behalf of Business	

Add'l Owner Signature	Spouses's Signature (If applicable)
Individually and On Behalf of Business	

Complete and fax to 704-364-3214 or email to underwriting@bondexchange.com

1) Do you have an Occupational License Number? If so, what is it?

2) Please choose one of the following that fits your business:

New Motor Vehicle Dealer - \$50,000

Used Motor Vehicle Dealer - \$50,000

Wholesale (less than 25 sales per year) - \$10,000

Wholesale (more than 25 sales per year) - \$50,000

Lessor/Retailer - \$50,000

Motorcycle and/or ATV Dealer - \$10,000

Vehicle Registration Service - \$25,000



Personal Financial Statement
Not to be used for Business Statements

To induce COMPANY to become surety for the Undersigned, or to accept the Undersigned as Indemnitor, the Undersigned submits the following Financial Statement

Personal financial statement for _____ SSN _____
Name

Street Address, City, State, ZIP

Home Phone No. _____ Bus. Phone No. _____
Name of Spouse

As of _____
Month Day Year

CURRENT ASSETS		CURRENT LIABILITIES	
Cash on hand (not in bank)	_____	Notes payable to (names & addresses):	_____
Cash in following banks (names & addresses):	_____	_____
.....	_____	_____
.....	_____	Sales Contracts & Chattel Mtgs. (Sch. 6)	_____
Stocks and bonds (Schedule 1)	_____	_____
Accounts receivable (Schedule 2)	_____	Accounts payable	_____
Notes receivable (Schedule 3)	_____	Current portion of long term debt.	_____
Other current assets (Schedule 6)	_____	Other current liabilities (Schedule 6)	_____
.....	_____	_____
.....	_____	_____
.....	_____	Current Year's Income Taxes Unpaid	_____
.....	_____	Prior Year's Income Taxes Unpaid	_____
.....	_____	Real Estate Taxes Unpaid	_____
.....	_____		
TOTAL CURRENT ASSETS		TOTAL CURRENT LIABILITIES	
FIXED ASSETS		LONG TERM LIABILITIES	
Real estate (Schedule 4):		Real estate debt (Schedule 4):	
Residence	_____	Residence	_____
Other	_____	Other	_____
Cash value of life insurance (Schedule 5)	_____	Borrowed on life insurance (Schedule 5)	_____
Other assets and investments (Schedule 6)	_____	_____
.....	_____	Other long term debt (Schedule 6)	_____
.....	_____	_____
.....	_____	_____
.....	_____	TOTAL LONG TERM LIABILITIES	
.....	_____		
TOTAL FIXED ASSETS		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	

Contingent Liabilities

For endorsements or guarantees \$ _____ For other purposes \$ _____

Give details _____

1. STOCKS AND BONDS

Name of Security	No. Shares	If any pledge, State to Whom and for What Purpose	Div. Paid Last 2 Yrs	Market Value	Book Value
TOTALS				\$	\$

2. ACCOUNTS RECEIVABLE

Name and Address (street and city) From Whom Due	For What is it Due	When Sold	When Due	Amount
TOTAL				\$

3. NOTE RECEIVABLE

Name and Address (street and city) From Whom Due	For What Due	How Secured	Date	Maturity	Amount
TOTAL					\$

4. REAL ESTATE

Description of Property	Title in Name of	Market Value	Cost	Date Acquired	Amount Encumbrance	Monthly Payments	Monthly Income
TOTAL							

5. LIFE INSURANCE – CASH VALUE

Name of Company	Policy Number	Name of Insured	Beneficiary	Face Value	Cash Value	Amount Borrowed

6. OTHER ASSETS AND LIABILITIES

Other Current Assets (itemize)	Other Current Liabilities (itemize)	Amount

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with other, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature _____

Soc. Sec. No. _____ Date of Birth _____

Signature _____

Soc. Sec. No. _____ Date of Birth _____

Date Signed _____