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 Conway, AR 72033
 Phone: (501) 255-2663



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 Suite #16
 Conway, AR 72032
 Fax: (501) 255-3299
 applications@bondamerica.com

MISCELLANEOUS BOND APPLICATION

Applicant's name in full (As to appear on the bond)		<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	
Address (Give number, street, city, state, & zip code)		Occupation	How long so engaged?
Type of Bond required	Amount of Bond		Effective Date of Bond
		\$	
Name of Obligee	Address of Obligee		Phone Number
Has application for this bond been declined by another company? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, explain on separate sheet		Prior Surety? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, give name:	

Has the business, or any other Principal involved:			
A. Had any lawsuits or judgments against them?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
B. Ever failed in business or declared bankruptcy?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
C. Ever been convicted of a felony offense?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
D. Ever had their license suspended, revoked, or denied?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
E. Ever been party to a surety bond claim?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If any answers are YES, provide details			

GIVE THE FOLLOWING INFORMATION ON EACH OWNER OR STOCKHOLDER.

Name	Social Security Number	Percent Ownership
Address		Telephone Number

Name	Social Security Number	Percent Ownership
Address		Telephone Number

Name	Social Security Number	Percent Ownership
Address		Telephone Number

COMPLETE FOR LICENSE / PERMIT BOND

Applicant's Net Worth	Do you carry General Liability Insurance? <input type="checkbox"/> YES <input type="checkbox"/> NO Limits?	Do you carry Property Damage Insurance? <input type="checkbox"/> YES <input type="checkbox"/> NO Limits?
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The undersigned hereby declares the truth of the representations herein, and that they are made to induce Surety to issue the Bond(s) applied for. The undersigned agrees that the Surety may decline the Bond(s) applied for or may cancel or terminate same without incurring any liability whatsoever to the Undersigned. In consideration of the issuance of the Bond(s) herein applied for, or any Bond(s) in substitution for or in succession of the said Bond(s), or any increase or extension of time of the said Bond(s), the Undersigned hereby agrees:

- (1) To hereby authorize the Surety to make such pertinent inquiry as may be necessary from financial institutions, persons, firms and corporations in order to confirm and verify information referred to or listed herein;
- (2) To pay to the Surety the agreed premium upon execution of the Bond(s) and annually in advance thereafter;
- (3) To furnish the Surety with satisfactory and conclusive termination evidence that there is no further liability on the Bond(s);
- (4) To perform all the conditions of said Bond(s) and will indemnify and save the Surety harmless from demands, losses, costs, damages and expenses, Including attorney's and counsel fees deemed necessary by the Surety, which Surety may sustain or incur by reason of the issuance of such Bond(s) or obtaining a release of or evidence of termination under such Bond(s);
- (5) That the surety shall have (1) the exclusive right to adjust, settle, or compromise any claim under such Bond(s), and (2) the right, as its sole option and sole discretion, to increase or decrease the penalty of any such

I M P O R T A N T

If Sole Owner, applicant must sign on behalf of firm, Applicant and spouse must sign Additional Indemnity below

If Partnership, all partners must sign on behalf of firm. All Partners and spouses must sign Additional Indemnity below

If Corporation, President or Vice President must sign and Secretary must attest and affix seal. All major stockholders and spouses must sign Additional Indemnity below.

Bond(s), to change the Obligee(s) therein, to execute any continuations, enlargements, modifications and renewals thereof or substitute the same or different conditions, provisions and Obligee(s) therein, it being agreed that this Indemnity Agreement shall cover such new or changed Bond(s) or renewals even though the Surety's action or consent may or does substantially increase the liability of the applicant and the Undersigned;

(6) That the voucher or other evidence showing payment made by the Surety in good faith by reason of such Bond(s) or any renewal, extension, or substitution thereof shall be conclusive and in any event prima facie evidence of such payment and the priority thereof and of the liability of the Undersigned therefore to the Surety; and

(7) The Undersigned further agrees to reimburse the Surety for all expenses, counsel and attorney fees incurred by the Surety in enforcing any provision of this agreement.

Regardless of the date this Indemnity Agreement is signed, it is effective as of the date of execution of the above mentioned Bond(s) pursuant to certain promises the agreements made by the Undersigned.

Dated the _____ Day of _____, _____

IF APPLICANT IS AN **INDIVIDUAL OR PROPRIETORSHIP**, SIGN HERE:

NAME OF INDIVIDUAL OR PROPRIETORSHIP _____

WITNESS _____

INDIVIDUALLY AND AS PROPRIETOR _____

IF APPLICANT IS A **PARTNERSHIP**, SIGN HERE:

NAME OF PARTNERSHIP _____

INDIVIDUALLY AND AS PARTNER _____

INDIVIDUALLY AND AS PARTNER _____

INDIVIDUALLY AND AS PARTNER _____

INDIVIDUALLY AND AS PARTNER _____

IF APPLICANT IS A **CORPORATION**, SIGN HERE:

NAME OF CORPORATION _____

ATTEST _____
SECRETARY

BY: _____
PRESIDENT or VICE PRESIDENT

IF APPLICANT IS A CORPORATION, ALL OWNERS, (STOCKHOLDERS) AND ADDITIONAL INDEMNITORS MUST SIGN

In consideration of executing the Bond(s) applied for by Applicant, the Undersigned, now referred to as Indemnitor(s), acknowledge(s) that the above Indemnity Agreement has been read and the Indemnitor(s) is (are) aware of the contents of the Indemnity Agreement. The Indemnitor(s) agree(s) to be bound by the Indemnity Agreement to the same extent as the Applicant. This obligation imposes individual liability on the Indemnitor(s) as well as joint liability with the Applicant. The Indemnitor(s) has (have) sufficient interest in the performance of this obligation to execute the agreement and is (are) fully empowered to exercise this agreement.

INDEMNITOR _____

INDEMNITOR _____

INDEMNITOR _____

INDEMNITOR _____