



PROBATE BOND & GUARDIANSHIP BOND APPLICATION

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Applicant Information

Name of Applicant			Age	Phone		Email	
<input type="checkbox"/> Own	<input type="checkbox"/> Rent	Street Address		City		State	Zip
How long at this address?			SSN		Driver's Lic. No.		State
Marital Status		Spouse Name			Your Net Worth \$		
Education Level <input type="checkbox"/> HIGH SCHOOL (9-12) <input type="checkbox"/> COLLEGE (1-6)				Your relationship to the Ward or Decedent			
Present Employer			Address			Phone	
Present Occupation		How long employed?		If retired, give former occupation and how long employed			
HAVE YOU EVER:	1. declared bankruptcy?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	3. had a criminal conviction?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	2. had a civil judgment?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	4. been bonded?		<input type="checkbox"/> YES <input type="checkbox"/> NO
If the answer is YES to any of the above, please attach a full explanation.							

Estate Information

Case No.		Hearing Date		Bond Amount \$	
Bond to be filed in The		Court of		County, the State of	
Appointment is:		<input type="checkbox"/> Temporary	<input type="checkbox"/> Permanent	<input type="checkbox"/> Successor	<input type="checkbox"/> Additional or Co-
Date of Appointment		If over 6 months ago. Explain reason for delay			
<input type="checkbox"/> GUARDIAN <input type="checkbox"/> CONSERVATOR	<input type="checkbox"/> Minor		Date of Birth		
	<input type="checkbox"/> Incompetent		Date Declared Incompetent		
	Name of Minor/Incompetent (Ward)				
	Current health status of the ward			Where does the ward reside?	
	What is the source of the ward's funds?				
	Will any assets be under court restriction? <input type="checkbox"/> YES <input type="checkbox"/> NO			Are guardian funds to be used for the support of the ward? <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If yes, provide copies of monthly expenditures and income</small>	
<input type="checkbox"/> EXECUTOR <input type="checkbox"/> ADMINISTRATOR <input type="checkbox"/> SPECIAL ADMINISTRATOR <input type="checkbox"/> ADMINISTRATOR WITH WILL ANNEXED <input type="checkbox"/> PERSONAL REPRESENTATIVE	Name of Decedent				
	Date of Death				
	Was there a Will? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, date of Will				
	List of names of heirs or beneficiaries of Decedent:				

Estate Assets

Cash \$	Securities \$	Debts \$	Real Property \$	Misc. Assets \$
Annual Income (interest, rents, SSI, etc.) \$	Applicant's share In the Estate \$		Bank where funds will be deposited	
Bank Address		City	State	Zip
How will securities be safeguarded (Safe deposit, Broker, etc.)				
Attorney of Record		Law firm	Attorney Phone	
Address		City	State	Zip
Will the attorney remain involved throughout the duration of this estate?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Will professional accounting, investment or legal services be provided on an ongoing basis?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
If the answer is YES to any of the following questions, please attach a full explanation.				
Is bond required on the demand of an interested party?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are there any disputes among the heirs?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does this bond replace that of another bonding company?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does Applicant replace a prior Fiduciary?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does estate contain a going business?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is Applicant indebted to the estate?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you understand that increases or reductions in bond amount must be court approved?			<input type="checkbox"/> YES	<input type="checkbox"/> NO

Indemnity Agreement

IN CONSIDERATION of the execution of the bond for which application is made, the undersigned (collectively, "Applicant") for themselves, their personal representatives, heirs, successors and assigns, hereby agree with, warrant and represent to, and bind themselves jointly and severally to, Surety and its co-sureties, re-insurers, and any other company which may execute a bond or bonds at the request of Surety (individually and collectively called "Surety") as follows:

- Applicant agrees to pay Surety an advanced premium for the first year or a fractional part thereof that is earned and the amount due annually thereafter in accordance with Surety's then current premium rates or any minimum earned premium until Surety shall be discharged or released from any and all liability and responsibility under said bond, and all matters arising therefrom, and until competent written legal evidence of such discharge or release, satisfactory to Surety, is furnished to Surety.
- Applicant agrees that Surety may make any credit checks, including consumer and investigative credit checks, it deems necessary.
- Applicant warrants and represents that the questions answered and information furnished in connection with the application are true and correct.
- Applicant agrees to indemnify and keep indemnified Surety and its agents and representatives and hold and save it them harmless from and against any and all liability, damage, loss, cost and expense of whatsoever kind or nature, including consul and attorney's fee, which Surety or its agents or representatives may at any time sustain or incur by reason or in consequence of have executed or procured the execution of the bond or enforcing this agreement against any of the undersigned or in procuring or in attempting to procure its release from liability under the bond.
- If Surety shall set up a reserve to cover any liability, claims, suit or judgment under said bond, the undersigned will, immediately upon demand, deposit with Surety a sum of money, equal to such reserve and any increase thereof, to be held by Surety as collateral security on said bond. Any such collateral shall be available, in the discretion of Surety, as collateral security on any other or all bonds heretofore or hereafter executed for at the requests of any of the undersigned.
- If Surety shall procure any other company or companies to execute or join with it in executing, or to reinsure said bonds, this instrument shall insure to the benefit of such other company or companies, its or their successors and assigns, so as to give it or them a direct right of actions against the indemnitors to enforce the provisions of this instrument.
- An itemized statement of payments made by Surety, sworn to by an officer of Surety, shall be prima facie evidence of the liability of the undersigned to reimburse Surety for such payments with interests.

