



POINDEXTER Surety Services

Member of The Poindexter Group of Companies



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Se habla Castellano

BUSINESS SERVICES BOND APPLICATION

\$5,000 \$10,000 \$25,000 \$50,000 \$100,000

Name of Insured	
Business Address	
E-mail	Telephone

Type of Business		
Total # of Employees	# of Officers	# of Officers to be Covered

Have you sustained any employee dishonesty losses in the last six (6) years?

No Yes - Attach date(s), amount(s), employee's name(s) and action(s) taken.

Have you or any of your employees been convicted of a felony?

Yes No

I affirm that the information that I have provided above is true to the best of my knowledge and believe. I understand that coverage is NOT effective until application is accepted by the company, carrier, surety, and/or co-surety(ies). I acknowledge that the 'conviction requirement' clause and the 'on premises' definitions have been fully explained to me, that I understand the coverage limitations of this bond policy.

Signature

Date