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## **CONTRACTOR'S LICENSE BOND APPLICATION**

## Contractor surety bonds, all classes of local and state licenses and permits

| Name of Applicant (as it is to appear on  | the bond)   |  | Entity  | d al . 🗆 O  |  |   |  |   |  |
|---|---|--|---|---|--|---|--|---|--|
| Address   |   |  |   | dual   Corporation  | County   |   |  | State Zip Code  |  |
| Ourser Name (if Applicant is a business antity)   |   |  | TINI  | Ourse CCN   | Email Ada  | lyono   |  |   |  |
| Owner Name (if Applicant is a business entity)  Business FE   |   |  | :IIN  | Owner SSN   | Email Add  | iress   |  |   |  |
| Primary Website URL   |   | Business Phone Number  |   | Years of Experience / Y   | ears Licensed  | Licensed License, UBI, La   |  | &I or Application Number  |  |
| Does the business, or any principal invo  |   | es 🗆 No  | Explanations fo   | r fields marked <b>Yes</b> (If a l  | onger explanation  | n is necessary, attac   | ch to the en   | d of this document  |  |
| 3. had any lawsuits or judgments against them? 4. had a license or bond cancelled or denied? 5. been a party to a surety bond claim?  □ Ye  |   | es   |   |   |  |   |  |   |  |
| BOND AND OBLIGE   |   |  |   |   |  |   |  |   |  |
| Bond Amount \$  | Effective Date  | T  | Type of Bond  |   |  |   |  |   |  |
| Full Name of Obligee (First, Last; or Business Name)  |   |  |   |   | • .  | their own bond for  |  | es, attach a copy   |  |
| Address   |   |  |   | City  | es 🗆 No  |   | State  | Zip Code  |  |
|   |   |  |   |   |  |   |  | '   |  |
| I/We the undersigned declare that the all / or increases. I/We agree individually at or nature which arise by reason of the enthis Application. An itemized statement obligation to Surety. At any time Surety I/We authorize Surety as well as its succappeal such judgment or at Surety's election of Surety may demand from Principal and/Surety to pay such claim or be held by St. | nd as a firm to full<br>xecution of bond(s<br>of loss and expens<br>may demand from<br>cessors and assigution to have the corridor indemnitors sufficiently as collateral | y indemnify and instance of the undersign of the undersign one to adjust, see asse, cross-actificient collateral security against parts of the undersign of the | nd hold harmle suant to this Apply Surety, sworn ned a monetary settle or comprocition or proceed ral to discharge inst loss. | ss Surety from and again plication, including attorn in to by an officer of Suret by sum to secure any acture omise and claim, demanding, or and part of it or a even claim against Suret | st any and all cley fees and cost<br>y, shall be prima<br>al or contingent<br>I, suit or judgme<br>ny appeal, writ of<br>y by reason of si | aims, demands or<br>its incurred by Sure<br>ifacie evidence of<br>liability or claim pe<br>nt upon said bond(<br>of error, certiorari o<br>uch Suretyship. Th | legal expenses in enforce the fact an ortaining to so and defer any part this sum ma | nses of any kind cing the terms of ad extent of my/ou the bond.  end such suit and thereof dismissed y be used by |  |
| and appropriate for the purposes of eval<br>the terms of the foregoing Indemnity Agr<br>by surety regardless of whether said rat-<br>that broker or agent fees may be include   | reement, as fully a<br>e is filed, unfiled, s   | s though eac<br>special, non-s   | h of the unders<br>tandard or any   | igned were the sole appl deviation from rates histe   | icant named her  | ein. I/we specifical  | ly consent   | to the rate quote   |  |
| Signed and dated this   | da  | ay of  |   |   |  | _, 20   |  |   |  |
| Company Name:   |   |  |   | Applicant Signature:  |  |   |  |   |  |
| (Person authorized to sign for the C  | Company) Print  | Name:  |   |   |  |   | · · · · · · · · · · · · · · · · · · ·  |   |  |
| Indemnitors   |   |  |   |   |  |   |  |   |  |
| Indemnitor 1 Signature:   |   | Indemnitor 2 Signature:  |   |   |  |   |  |   |  |
| Indemnitor 1 Name:  |   |  |   | Indemnitor 2 Name:  |  |   |  |   |  |
| Indemnitor 3 Signature:   |   |  |   | Indemnitor 4 Signature:   |  |   |  |   |  |
| Indemnitor 3 Name:  |   |  |   | Indemnitor 4 Name:  |  |   |  |   |  |