



SURETY ONE

EXCESS OF FDIC DEPOSITORY SURETY BOND QUESTIONNAIRE

Email: Underwriting@SuretyOne.org | Facsimile: 919-834-7039 | Mail: P.O. Box 37284, Raleigh, NC 27627

| | | | |
|--|--|-----|------------------------|
| Applicant Name | Phone | Fax | FDIC# |
| | | | |
| Subsidiary or Subsidiaries Name | Number of years in business | | State of incorporation |
| Classified Assets as of Date _____ Substandard \$ Doubtful \$ Loss \$ | Business Address Street _____ City _____ State _____ Zip _____ | | |

| | |
|--|--|
| Does Applicant currently have Excess FDIC (EFDIC) bond (s) in place? <input type="checkbox"/> Yes <input type="checkbox"/> No | Requested effective date |
| Will any other sureties be providing EFDIC bonds for the applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No | Requested limit \$ |
| Has the requested bond ever been declined by another surety? <input type="checkbox"/> Yes <input type="checkbox"/> No | Estimated amount of uninsured deposits \$ |

| | Limits | Expiration Date | Company |
|-------------------------------|--------|-----------------|---------|
| Financial Institution Bond: | _____ | _____ | _____ |
| Director & Officer Liability: | _____ | _____ | _____ |
| Excess Deposit Bond: | _____ | _____ | _____ |

| | |
|--|--|
| During the past 3 years has the applicant or any subsidiary been placed under or does management anticipate any of the following | |
| Type of formal enforcement action, or order agreement? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Memorandum of understanding requiring public disclosure as set for by securities law? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|---|--|
| During the past 2 years have ANY Directors of Officers been alerted to any of the following conditions: | |
| Concentration of credit which warrants reduction or correction? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Extension of credit which warrants reduction or correction? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Significant violations of Laws or regulations? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Conflict of interest transactions? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please explain and attach documentation | _____ |

Please attach to this questionnaire a copy of the most recent external audit of Directors Exam, the Account Holders Report, a copy of the bond if any and any supporting documents.

Submitted by: _____
Name Title Date