

COMMERCIAL SURETY APPLICATION

FOR LICENSE, PERMIT & MISCELLANEOUS BONDS

Surety Placement Services

7975 N Hayden Rd Suite C-300

Scottsdale, AZ 85258

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SECTION I – GENERAL BOND INFORMATION			
Type of Bond (Attach Bond Form):	Amount of Bond:	Effective Date:	Expiration Date:
Obligee Name: (who is requiring the bond)		Obligee Address: (Street, City, State, Zip Code)	
Previous Bonding Company? (if any)		Reason for Changing Bonding Company?	

SECTION II - BUSINESS INFORMATION				
Company Name (Must be exactly as it appears on license):		Corporate Tax ID (if any)		License and/or Application number:
Company Address:	City:	State:	Zip Code:	Business Phone (Cell)
Type of Business: <input type="checkbox"/> Individual <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> S Corporation		Date Business Started?		# of Owners, Partners or Members?
Business Net Worth:	Name & Location of Bank:			

SECTION III - PERSONAL INFORMATION				
Applicants Name:		Social Security #:		Date of Birth:
Spouse's Name:		Social Security #:		Date of Birth:
Residence Address:		City:		State:
				Zip Code:
				<input type="checkbox"/> Own <input type="checkbox"/> Rent
% Ownership of business	Title: <input type="checkbox"/> Owner <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> President <input type="checkbox"/> Other: _____		Years of experience in this field?	
Estimated Personal Net Worth:				

ADDITIONAL OWNERS OR PARTNERS: PERSONAL INFORMATION				
Name:		Social Security #:		Date of Birth:
Spouse's Name:		Social Security #:		Date of Birth:
Residence Address:		City:		State:
				Zip Code:
				<input type="checkbox"/> Own <input type="checkbox"/> Rent
Estimated Personal Net Worth:	Balance of Mortgage Owed:	% Ownership of business:		

Has any company refused to issue bonds for any purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please explain:
Has applicant ever failed in business? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please explain:
Has applicant ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please explain:
Do you have any liens, claims or judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please explain:

**All information furnished on this Application will be utilized and relied upon in the issuance of any bonds on and after the date above.*



Credit Consent Form

In order to obtain personal credit information on the principal, we will need the following information regarding all applicants named in the application package. By applicant(s) signing below, applicant(s) hereby authorize Surety Placement Services, LLC to obtain credit reporting information and authorize copies of said credit reports to be provided to represented sureties for bond placement.

- Individual Legal Name _____
- Residence Address _____
Residence City State Zip _____
- Date of Birth _____
- Social Security Number _____
- Other Names Used _____

Completion of this form constitutes permission for Surety Placement Services, LLC to obtain consumer on behalf of all sureties we represent, which will be used to determine bonding eligibility. This information will be held in the strictest confidence.

Signature

Date

If you have any questions on how to properly complete this form, please contact your producer for assistance.

Attach additional sheets as needed to provide necessary information on all applicants named within the application package.