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TRUCK BROKER BONDS

The truck broker bonds can be written for low premiums with good credit clients, but can also be written for bad credit clients for higher premiums. The higher premiums for the bad credit clients do not usually require any financial statements.

The lower premium good credit clients may require financial statements. If the truck brokerage is new a personal financial statement and resume will be required.

For existing companies to get the best premium a personal and business financials statement is required. In some rare cases if the credit score is really high then financial statements may not be required.

If financials are required I can usually accept any computer generated financials for the business a year end balance sheet with an income statement (profit & loss). The personal on all owners can be within 6 months old if you already have a similar form completed.

The truck broker bonds can also be written with full letter of credit or cash collateral with lower premiums.

See the attached fill in the blank forms. The credit authorization must be completed and signed to quote due to credit laws.

BLANKET AUTHORIZATION FORM

Authority is hereby granted to any Individual, Firm or Corporation and any financial institution to furnish Surety upon its request, with any information concerning or pertaining to the undersigned's financial standing, credit or manner of meeting obligations. A copy of this agreement shall be considered the same as the original. This authorization is to remain in force until rescinded by the applicant in writing.

Signature Date

(Printed Name)

Social Security Number

Home Address (Street)

City, State, Zip

Signature Date

(Printed Name)

Social Security Number

Home Address (Street)

City, State, Zip

Signature Date

(Printed Name)

Social Security Number

Home Address (Street)

City, State, Zip

Signature Date

(Printed Name)

Social Security Number

Home Address (Street)

City, State, Zip

Signature Date

(Printed Name)

Social Security Number

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City, State, Zip

Signature Date

(Printed Name)

Social Security Number

Home Address (Street)

City, State, Zip

AGENT USE ONLY

BOND NUMBER

Application for License, Permit and Miscellaneous Bonds

A BOND INFORMATION											
TYPE OF BOND					BOND AMOUNT			REQUESTED EFFECTIVE DATE / /			
BOND TO BE FILED WITH (OBLIGEE)				ADDRESS OF OBLIGEE							
Does the Applicant have any other Surety bonds in force?					<input type="checkbox"/> Yes <input type="checkbox"/> No		If you answered YES to any of the questions above, please attach a detailed explanation.				
Has another Surety Company declined to write this or any previous bond?					<input type="checkbox"/> Yes <input type="checkbox"/> No						
Have you ever had a bond involuntarily terminated or cancelled?					<input type="checkbox"/> Yes <input type="checkbox"/> No						
B BUSINESS INFORMATION											
COMPANY NAME (MUST BE EXACTLY AS IT IS TO APPEAR ON BOND)							BUSINESS PHONE				
ADDRESS							BUSINESS FAX				
CITY/ STATE/ ZIP							COMPANY TAX ID NUMBER				
PRIOR BOND OR CURRENT BOND WITH		HOW LONG		BOND NUMBER		REASON FOR CHANGE					
<input type="checkbox"/> Individual <input type="checkbox"/> Corporation		IF CORPORATION, DATE INCORPORATED / /		IF PARTNERSHIP OR CORPORATION, NUMBER OF PARTNERS OR STOCKHOLDERS (complete section C for all stockholders with over 10% interest)							
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC/ LLP						DESCRIBE TYPE OF BUSINESS		LICENSE NUMBER (if applicable)			
						NUMBER OF YEARS EXPERIENCE		HOW LONG UNDER CURRENT OWNERSHIP?			
BUSINESS ACCOUNT BANK NAME		BANK ADDRESS						BANK PHONE NUMBER			
BUSINESS CHECKING ACCOUNT NUMBER		ACCOUNT BALANCE		BUSINESS SAVINGS ACCOUNT NUMBER		ACCOUNT BALANCE					
CREDIT REFERENCES WITH WHOM YOU DO BUSINESS											
NAME		ADDRESS					PHONE NUMBER				
NAME		ADDRESS					PHONE NUMBER				
Have you been involved in a dispute where there was a lawsuit or lien was filed?					<input type="checkbox"/> Yes <input type="checkbox"/> No		If you answered YES to any of the questions above, please attach a detailed explanation.				
Have you been subject to a federal or state tax lien?					<input type="checkbox"/> Yes <input type="checkbox"/> No						
C PERSONAL INDEMNITOR INFORMATION											
INDIVIDUAL'S FIRST NAME/ MIDDLE NAME/ LAST NAME				DRIVER'S LICENSE NUMBER		DATE OF BIRTH		SOCIAL SECURITY NUMBER			
<input type="checkbox"/> Own <input type="checkbox"/> House		HOW LONG?		MONTHLY PAYMENT(S)		EMAIL ADDRESS					
<input type="checkbox"/> Rent <input type="checkbox"/> Apartment											
HOME ADDRESS/CITY/ STATE/ ZIP							HOME/ MOBILE PHONE				
EMPLOYER NAME				WORK PHONE		LENGTH OF EMPLOYMENT					
EMPLOYER ADDRESS				EMPLOYER CITY/ STATE/ ZIP							
<input type="checkbox"/> Married <input type="checkbox"/> Divorced		SPOUSE FIRST NAME/ MIDDLE NAME/ LAST NAME		DRIVER'S LICENSE NUMBER		DATE OF BIRTH		SOCIAL SECURITY NUMBER			
<input type="checkbox"/> Single <input type="checkbox"/> Separated											
SPOUSE EMPLOYER NAME				WORK PHONE		LENGTH OF EMPLOYMENT					
SPOUSE EMPLOYER ADDRESS				SPOUSE EMPLOYER CITY/ STATE/ ZIP							
DATE HOME PURCHASED / /		PURCHASE PRICE		CURRENT MARKET VALUE		PRESENT LOAN BALANCE(S)		LOAN NUMBER			
MONTHLY PAYMENT(S)											
PERSONAL ACCOUNT BANK NAME		BANK ADDRESS						BANK PHONE NUMBER			
PERSONAL CHECKING ACCOUNT NUMBER		ACCOUNT BALANCE		PERSONAL SAVINGS ACCOUNT NUMBER		ACCOUNT BALANCE					
NEAREST RELATIVE NAME		RELATIONSHIP		ADDRESS				PHONE NUMBER			
Have you, your spouse, or company ever : failed in any business venture? declared bankruptcy? been a principal or indemnitor on a bond which a claim was brought? subject to a federal or state tax lien?					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a guarantor for a third party liability? Have you ever been convicted of a felony? Are any of your assets in Trust(s)? If you answered YES to any of the questions above, please attach a detailed explanation.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	