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USA American Eagle Bonds INS Agency LLC dba Eagle Bonds Insurance  
www.usabonds.us email aebonds@msn.com Visa/Mastercard  
4121 E. Valley Auto Dr #104 Toll Free (855)852-2663 or (480) 471-8466  
Mesa, AZ 85206 Fax. (480) 985-2572 or (480) 985-2209

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## **PERFORMANCE & BID CONTRACT BONDS**

Thank you for your request. Please provide the following items to enable us to underwrite and respond in a timely matter. I can usually accept similar forms from other insurance companies

**1. Completed Surety Questionnaire**

**2. Business Financial Statements** Last 3 fiscal year end financial statements of business entity, plus current interim financial statements. If this statement is more than six months old, we require a current interim statement. Note: All financial statements are to include both a balance sheet and a profit and loss statement.

**3. Personal Financial Statement(s) of Owners (Format Attached)**

Required on all Stockholders of a Corporation who own more than 10% of the stock or all Partners of a Partnership, or the Sole Proprietor. We can usually accept similar formats if they are within 6 months old.

**4. Bank Verification From the bank.**

We can usually accept a similar form from the bank as long as it lists money and credit lines. See sample.

**5. Job References (Contact Information with Job Description)**

**6. Supplier References (Contact Information)**

**7. Work on Hand (Format Attached)**

**8. Copy of Construction Contract, Bond Forms, Bid Results (If Bid, Bid Specifications)**

Bid results would be other 2 bidders if there are any other bidders.

**9. Bond Request Form (attached).**

**10. Copy of company insurance certificate**

**11. Credit authorization signed by all owners.**

If you have any questions please do not hesitate to call us. We look forward to working with you.

**Thank you for your business!**

Please allow 3 days lead time  
for processing bid bonds

## Bid / Performance Bond Request

DATE \_\_\_\_\_  
CONTRACTOR \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PROJECT OWNER (OBLIGEE) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SOLICITATION / CONTRACT NO. \_\_\_\_\_  
JOB DESCRIPTION \_\_\_\_\_  
DATE BOND IS NEEDED BY \_\_\_\_\_

BID BOND
Bid Date: _____ Time: _____
Estimate: \$ _____
Bid Guarantee: _____ % or \$ _____
Special Bond Form? _____ (Please attach)
Originals Required? _____
Consent of Surety Required? _____
FedEx Number: _____
<b>Attach:</b> Key pages from spec: (cover page, description of work, bonding requirements and any mandatory bond) forms.

PERFORMANCE / PAYMENT BOND
Contract Price: \$ _____
Contract Date: _____
Performance _____ % Payment _____ %
Special Bond Form? _____ (Please attach)
FedEx Number: _____
<b>Attach:</b> Award letter / signed contract, schedule of values, list of suppliers and subcontractors, bonding requirements from spec plus any mandatory bond forms.

2<sup>nd</sup> Bid \$ \_\_\_\_\_ 3<sup>rd</sup> Bid \$ \_\_\_\_\_ 4th Bid \$ \_\_\_\_\_ Negotiated

### CONTRACT DETAILS (if awarded)

Sub Trades (if any) and \$ Amounts or state 0%: _____ _____ _____ _____ Percent Subcontracted: _____ %	Date work will begin: _____ Completion date <b>required</b> per contract: _____ Completion date <b>expected</b> : _____ Liquidated Damages per day \$ _____ Retainage: _____ % For multi-year service work, is bond annual?
Est. Materials: _____ % Est. Labor: _____ % Est. Profit / Overhead: _____ %	
*Attach any requirements concerning the Surety (Bonding Company) that appear in the specs*	

Current Work on Hand (Backlog - including ALL projects) \$ \_\_\_\_\_  
Amount currently available on Bank Line of Credit: \$ \_\_\_\_\_  
Prepared by (include name and title): \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ or Fax: \_\_\_\_\_

For Internal Use Only

**Contractor's Questionnaire**  
(Please fill out completely, sign, and date)

**Business Information**

Legal Name of Company: \_\_\_\_\_

Address (Do Not Provide a PO Box): \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Website: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_ Contact Person's Email Address: \_\_\_\_\_ Cell # \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_ Total # of Employees: \_\_\_\_\_

Date Business Formed: \_\_\_\_\_ Date Incorporated: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

Dunn & Bradstreet # \_\_\_\_\_ Overnight Service (i.e. FedEx, UPS, etc.): \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Organization (check one):     LLC     Corporation     Partnership     Proprietorship     Sub. S. Corporation

If SUCCESSOR to Prior Business, name of Predecessor: \_\_\_\_\_

Was Predecessor dissolved?     Yes     No    If yes, please explain why \_\_\_\_\_

Does the company currently hold any certifications (i.e. WBE, MBE, 8a, HUBZone, etc)?     Yes     No  
If yes, please list: \_\_\_\_\_ **\*\*\*Attach a copy of your certification(s)\*\*\***

**Company Ownership Information**

**List All Owners and/or Stockholders and Spouses of the Company**

Legal Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Title: \_\_\_\_\_ % Owned \_\_\_\_\_

SSN #: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_     Married     Single

Spouse's Legal Name: \_\_\_\_\_

Spouse's SSN#: \_\_\_\_\_ Spouse's Country of Citizenship: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street, City, State & Zip Code) Do Not Provide a PO Box

Legal Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Title: \_\_\_\_\_ % Owned \_\_\_\_\_

SSN #: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_     Married     Single

Spouse's Legal Name: \_\_\_\_\_

Spouse's SSN#: \_\_\_\_\_ Spouse's Country of Citizenship: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street, City, State & Zip Code) Do Not Provide a PO Box

Legal Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Title: \_\_\_\_\_ % Owned \_\_\_\_\_

SSN #: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_     Married     Single

Spouse's Legal Name: \_\_\_\_\_

Spouse's SSN#: \_\_\_\_\_ Spouse's Country of Citizenship: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street, City, State & Zip Code) Do Not Provide a PO Box

Legal Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Title: \_\_\_\_\_ % Owned \_\_\_\_\_

SSN #: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_     Married     Single

Spouse's Legal Name: \_\_\_\_\_

Spouse's SSN#: \_\_\_\_\_ Spouse's Country of Citizenship: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street, City, State & Zip Code) Do Not Provide a PO Box

Are any shareholders personal assets held in trusts?  Yes  No If yes, please describe and attach copies: \_\_\_\_\_

If trusts exist, will they indemnify the surety?  Yes  No If no, please explain: \_\_\_\_\_

List any subsidiaries, holding companies and/or affiliates of the applicant company or entities that are owned/controlled by the owners and / or spouses listed above. **If there are none, check here to so indicate:**  **No subsidiaries, holding companies and/or affiliates.**

Firm Name	Ownership	Type of Business	Cross/Corp. Indemnity?
			<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
			<input type="checkbox"/> Yes <input type="checkbox"/> No

\*\*\*Provide copies of most recent Tax Returns for each firm listed\*\*\*

Is full corporate and personal indemnity by all owners and spouses and affiliates of the company provided?  Yes  No

If no, please explain: \_\_\_\_\_

Are the owners personally active in daily affairs of the business?  Yes  No

If no, please explain \_\_\_\_\_

Has company ownership remained unchanged in the past two years?  Yes  No

If no, please explain \_\_\_\_\_

Are all owners and spouses free of any record of criminal conviction?  Yes  No

If no, please explain \_\_\_\_\_

Credit Reports: Are the individual owners / spouses and company credit reports free of negative items?  Yes  No

If no, please explain \_\_\_\_\_

Has the company, any affiliate or subsidiary, or any owners / spouse or companies in which they have had an ownership interest or managerial role:

a. Ever defaulted on a contract?  Yes  No

b. Ever caused a surety to suffer a loss?  Yes  No

c. Any Claims or Non-Payment Notices currently filed against your company?  Yes  No

d. Owe/owed money to or requested financial assistance from a surety?  Yes  No

e. Ever experienced a bankruptcy?  Yes  No

f. Been liened by a taxing authority?  Yes  No

g. Is the company or any of its owners, officers or affiliates currently involved in any litigation?  Yes  No

h. Withdrawn company funds for personal investing activity?  Yes  No

i. Currently or plan to use factoring companies?  Yes  No

j. Currently engaged in development work or speculative building activities?  Yes  No

k. Acting as a surety or indemnitor for others?  Yes  No

l. Acting as an endorser for others on their notes or accounts?  Yes  No

If any answered Yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**Company's Operations/General Information**

**List All Company Officers and Key Operating Personnel:**

Name	Position/Responsibility	Age	Time In Position	Years in Industry

\*\*\*Provide resumes\*\*\*

Name of contact person for monitoring bonded projects: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Name of contact person for billing/invoices: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_ Cell: \_\_\_\_\_

What class of construction work does company:

- a. Generally do \_\_\_\_\_
- b. Specialize in \_\_\_\_\_
- c. At times handle \_\_\_\_\_

What is your geographic area of operation? \_\_\_\_\_

What state(s) is your firm licensed to do business? \_\_\_\_\_

\*\*\*Provide copies of each state license for your firm\*\*\*

List the major Competitors for the company: \_\_\_\_\_

What percentage (%) of the company's work is for: \_\_\_\_\_ Government Agencies \_\_\_\_\_ Private Owners

Does the company ever engage in Joint Ventures?  Yes  No If yes, give details: \_\_\_\_\_

How does the company confirm financing on private work? \_\_\_\_\_

Is your firm unionized?  Yes  No How many work crews? \_\_\_\_\_

Has the company ever been or currently in arrears on union payments?  Yes  No If yes, give details: \_\_\_\_\_

What percentage (%) of work is normally subcontracted to others? \_\_\_\_\_ What trades do you normally subcontract? \_\_\_\_\_

Are bonds required from subcontractors or suppliers?  Yes  No If yes, over what amount? \_\_\_\_\_

Do you presently own equipment necessary to complete the program outlined above?  Yes  No

If no, will you be  buying  renting  leasing?

Anticipated total acquisition cost (including down payment) \$ \_\_\_\_\_ If leasing, what are the terms of the lease(s)? \_\_\_\_\_

What is the company's policy/procedure on performing background checks of new and/or existing employees? \_\_\_\_\_

**Continuity and Job Completion:**

Formal Buy-Sell Agreement in place?  Yes  No \*\*\*If, yes please attach a copy\*\*\*

How is the Buy-Sell Agreement funded? \_\_\_\_\_

What arrangements have been made to assure contracts are completed in the event key personnel are not available? \_\_\_\_\_

What incentives are given to the key employees to remain with the company and see projects through to completion? \_\_\_\_\_

**Surety Relations/History:**

Agent/Agency	How Long with Agent?	Carrier/Surety	Single/Aggregate	Funds Admin. or Collateral?	How Long with Surety?	Reason For Leaving

\*\*\*Attach a copy of the General Indemnity Agreement on file with the most recent surety\*\*\*

Date last performance bond was provided: \_\_\_\_\_

In the last twelve months how many: Bid bonds provided \_\_\_\_\_ Performance bonds provided \_\_\_\_\_

Has the company ever had a bond request denied, granted with conditions you considered unacceptable, or had your surety credit terminated?

Yes  No

If yes, please explain \_\_\_\_\_

Has the company ever failed to qualify for a performance bond after an award when a bid bond was used?

Yes  No

If yes, please explain \_\_\_\_\_

**Capacity:**

What is the single largest contract you expect to obtain in the near future? \$ \_\_\_\_\_

What is the largest backlog of work at one time in the past 3 years? \$ \_\_\_\_\_ Year \_\_\_\_\_

What is the largest backlog of work you anticipate to have in the near future? \$ \_\_\_\_\_

What is your total revenue projected for the next twelve month period? \$ \_\_\_\_\_

What percentage of revenues is derived from bonded contracts? \_\_\_\_\_%

**Largest Contract References**

Owner on Contract: \_\_\_\_\_ Project Name: \_\_\_\_\_

Contract \$: \_\_\_\_\_ Gross Profit \_\_\_\_\_ Year Completed: \_\_\_\_\_

Brief Description of Work: \_\_\_\_\_ Bonded  Yes  No

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner on Contract: \_\_\_\_\_ Project Name: \_\_\_\_\_

Contract \$: \_\_\_\_\_ Gross Profit \_\_\_\_\_ Year Completed: \_\_\_\_\_

Brief Description of Work: \_\_\_\_\_ Bonded  Yes  No

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner on Contract: \_\_\_\_\_ Project Name: \_\_\_\_\_

Contract \$: \_\_\_\_\_ Gross Profit \_\_\_\_\_ Year Completed: \_\_\_\_\_

Brief Description of Work: \_\_\_\_\_ Bonded  Yes  No

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner on Contract: \_\_\_\_\_ Project Name: \_\_\_\_\_

Contract \$: \_\_\_\_\_ Gross Profit \_\_\_\_\_ Year Completed: \_\_\_\_\_

Brief Description of Work: \_\_\_\_\_ Bonded  Yes  No

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Banking Information**

Name of Bank #1: \_\_\_\_\_ Address: \_\_\_\_\_

Account Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_ Acct #(s): \_\_\_\_\_

With bank since: \_\_\_\_\_ Current line of credit amount: \$ \_\_\_\_\_ Amt in use: \$ \_\_\_\_\_ When does it expire? \_\_\_\_\_

Have any loans been restructured to avoid delinquency?  Yes  No If yes, please explain \_\_\_\_\_

Name of Bank #2: \_\_\_\_\_ Address: \_\_\_\_\_

Account Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_ Acct #(s): \_\_\_\_\_

With bank since: \_\_\_\_\_ Current line of credit amount: \$ \_\_\_\_\_ Amt in use: \$ \_\_\_\_\_ When does it expire? \_\_\_\_\_

Have any loans been restructured to avoid delinquency?  Yes  No If yes, please explain \_\_\_\_\_

\*\*\*Attach a complete copy of all current Banking Agreements\*\*\*

**Financial Reporting and Internal Controls**

Fiscal year-end is \_\_\_\_\_ (for taxes) Is a Net Profit expected for the upcoming fiscal year-end?  Yes  No

Company state and federal taxes (including withholding) paid current?  Yes  No

If no, please explain: \_\_\_\_\_

Name of Accounting firm: \_\_\_\_\_ Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

This Accounting firm is:  CPA  Public Accountant  Other How long has this firm prepared your financial statements? \_\_\_\_\_

**Financial Statements are:**

- a. For Financial Reporting:  % of Completion  Accrual  Completed Job  Cash
- b. Fiscal Year-End:  Audit  Review  Compilation  In-House
- c. Interim:  Audit  Review  Compilation  In-House

**How frequently do you prepare:**

- a. Interim Financial Statements:  Semi-Annually  Quarterly  Monthly
- b. Work in Progress Reports:  Semi-Annually  Quarterly  Monthly

Do you have an accountant/bookkeeper on staff?  Yes, Fulltime  Yes, Part time  No

**What Software is used for:**

- a. Accounting: \_\_\_\_\_ How often updated? \_\_\_\_\_
- b. Job Cost Analysis: \_\_\_\_\_ How often updated? \_\_\_\_\_
- c. Estimating: \_\_\_\_\_

What quality control procedures are used for reviewing new bid proposals? \_\_\_\_\_

**Control and supervision of contracts by company supervisory staff are performed on what basis:**

- a.  Daily  Weekly  Monthly
- b.  Personal Job Site Visits  Through Reports  Other If other, please specify \_\_\_\_\_

Is field staff reporting of jobs costs broken down by labor, materials, and by project?  Yes  No If no, please explain how job costs are monitored: \_\_\_\_\_

What steps does the company take to ensure the collection of past due accounts receivable? \_\_\_\_\_

**Attorney Information**

Name of Law firm (If an outside counsel): \_\_\_\_\_ Address: \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How long has your company been represented by this person? \_\_\_\_\_

**Credit References**

**Give names of principal suppliers/subcontractors:**

Name of Firm	Phone #	Material/Service Provided

Additional Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The Undersigned does hereby authorize KIS Surety LLC and it's designees and/or representatives to make inquiries including the obtaining of a credit report or personal history report as necessary concerning the undersigned's financial standing, credit, personal standing or manner of meeting obligations. I understand this will be to verify the accuracy of the statements made and to determine my worthiness. I certify the above and the statements contained in the attachments are true and accurate as of the state date (s). The undersigned agrees to INDEMNIFY and HOLD HARMLESS KIS Surety LLC Its Sureties, related companies, affiliates, reinsurers, officers and employees from all loss, cost and expense (including all legal expenses) that may arise in connection with this application. A Copy of this agreement shall be considered the same as the original. This authorization is to remain in full force until rescinded by the applicant in writing. These statements are made for the purpose of obtaining a bond. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).  
 Section 817.2334 (1) (b), F.S. "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an applicaiton containing any false, misleading information is guilty of a felony in the third degree."

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
 Name of Company

\_\_\_\_\_  
 Completed By

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Title

**Authorization and Credit Release:**

Owner \_\_\_\_\_ Date \_\_\_\_\_

Owner \_\_\_\_\_ Date \_\_\_\_\_



## PERSONAL FINANCIAL STATEMENT

As of \_\_\_\_\_, \_\_\_\_\_

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	
Business Name of Applicant/Borrower	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks .....	\$ _____	Accounts Payable .....	\$ _____
Savings Accounts .....	\$ _____	Notes Payable to Banks and Others .....	\$ _____
IRA or Other Retirement Account .....	\$ _____	(Describe in Section 2)	
Accounts & Notes Receivable .....	\$ _____	Installment Account (Auto) .....	\$ _____
Life Insurance-Cash Surrender Value Only .....	\$ _____	Mo. Payments \$ _____	
(Complete Section 8)		Installment Account (Other) .....	\$ _____
Stocks and Bonds .....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 3)		Loan on Life Insurance .....	\$ _____
Real Estate .....	\$ _____	Mortgages on Real Estate .....	\$ _____
(Describe in Section 4)		(Describe in Section 4)	
Automobile-Present Value .....	\$ _____	Unpaid Taxes .....	\$ _____
Other Personal Property .....	\$ _____	(Describe in Section 6)	
(Describe in Section 5)		Other Liabilities .....	\$ _____
Other Assets .....	\$ _____	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities .....	\$ _____
<b>Total</b>	\$ _____	Net Worth .....	\$ _____
		<b>Total</b>	\$ _____

Section 1. Source of Income	Contingent Liabilities
Salary .....	As Endorser or Co-Maker .....
Net Investment Income .....	Legal Claims & Judgments .....
Real Estate Income .....	Provision for Federal Income Tax .....
Other Income (Describe below)* .....	Other Special Debt .....

Description of Other Income in Section 1.


\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds.** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and Other Assets.** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

**Section 6. Unpaid Taxes.** (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_





# Bank Reference Request

Client Name: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Please furnish the Surety with the following information:

1. How long has this client been with your bank? \_\_\_\_\_
2. Average deposit balance last 6 months? \_\_\_\_\_
3. Any overdrafts? \_\_\_\_\_ Float? \_\_\_\_\_ Returned Checks? \_\_\_\_\_
4. Is there an established line of credit? \_\_\_ Yes \_\_\_ No
5. What is the gross amount? \_\_\_\_\_
6. How much currently in use? \_\_\_\_\_
7. Average amount in use over prior year \_\_\_\_\_
8. How is the line secured? \_\_\_\_\_
9. When does the current line expire? \_\_\_\_\_
10. Are all loans current? \_\_\_ Yes \_\_\_ No
11. In compliance with all loan covenants? \_\_\_ Yes \_\_\_ No
12. Describe any loan restructuring to avoid delinquency.
13. Describe any litigation involving the company, its owners, officers or affiliates.
14. General Credit Experience: \_\_\_ Excellent \_\_\_ Good \_\_\_ Fair \_\_\_ Poor \_\_\_ None
15. Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prepared by: \_\_\_\_\_ on \_\_\_\_\_  
(Signature of Bank Representative) (Date)

Printed name and title: \_\_\_\_\_

Phone: \_\_\_\_\_

**Important! AFFIX DEPOSITORY STAMP HERE OR PRINT THIS DOCUMENT ON BANK LETTERHEAD**

**[Affix Depository Stamp]**

## Credit Authorization

The undersigned does hereby authorize the Surety Bonds, LLC and it's designees to make inquiries including the obtaining of a credit report as necessary concerning the undersigned's financial standing, credit, or manner of meeting obligations. I understand this will be to verify the accuracy of the statements made and to determine my credit worthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). The undersigned agrees to INDEMNIFY and HOLD HARMLESS the \_\_\_\_\_ Surety Bonds, LLC, related companies, affiliates, sureties, reinsurers, officers and employees from all loss, cost and expense (including all legal expenses) that may arise in connection with this application. A copy of this agreement shall be considered the same as the original. This authorization is to remain in full force until rescinded by the applicant(s) in writing.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Name of Company: \_\_\_\_\_

Complete Address Including Zip Code: \_\_\_\_\_

Signature: x \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

### **Individual Company Owners**

Name of owner: \_\_\_\_\_

Home address, including zip code: \_\_\_\_\_

Social security number: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Signature: \_\_\_\_\_

x \_\_\_\_\_

Name of spouse of owner (indicate if single): \_\_\_\_\_

Home address, including zip code: \_\_\_\_\_

Social security number: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Signature: x \_\_\_\_\_

(Add pages if necessary)

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