

**License and Miscellaneous application for Non-Instant Issue Bonds and bonds in excess of \$5,000. Most bonds of \$5,000 or less are Instant Issue, use ID-1378 (CA). A financial statement of the business and its owner should be attached to this application.**

<b>BOND INFORMATION</b>	TYPE OF BOND	BOND #	AMOUNT \$	REQUESTED EFFECTIVE DATE				
<b>GENERAL INFORMATION</b>  **IF ROOFING OR SWIMMING POOL CONTRACTOR, INCLUDE THE FOLLOWING:  LIC. CLASS _____  LIC. # _____	NAME (MUST BE EXACTLY AS IT IS TO APPEAR ON BOND)			BUSINESS PHONE ( )				
	NAME OF OBLIGEE AND LICENSE NUMBER							
	BUSINESS STREET ADDRESS		CITY	STATE	ZIP			
	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC							
	NATURE OF APPLICANT'S BUSINESS		FED TAX ID	DATE STARTED	PREVIOUSLY BONDED BY (CO. AND BOND NO.)			
	BANK REFERENCE (BRANCH)		STREET ADDRESS	CITY	SAVINGS ACCT. NO.			
					CHECKING ACCT. NO.			
<b>PERSONAL INFORMATION</b>  MUST BE COMPLETED BY APPLICANT, PARTNERS, CORPORATE OWNER/OFFICERS AND MEMBERS/MANAGERS OF LIMITED LIABILITY COMPANIES.  (USE ADDITIONAL APPLICATION IF MORE THAN TWO.)  <b>WARNING</b>  THIS IS AN APPLICATION FOR A BOND. A BOND IS A CREDIT RELATIONSHIP. A BOND IS NOT AN INSURANCE POLICY. THE APPLICANT (PRINCIPAL) AND INDEMNITORS ARE JOINTLY AND SEVERALLY RESPONSIBLE FOR THE OBLIGATIONS COVERED BY THE BOND AND THE CONDITIONS OF THE INDEMNITY AGREEMENT CONTAINED IN THIS APPLICATION.	<b>BUSINESS REFERENCES OR SUPPLIERS</b>		NAME	STREET ADDRESS	CITY	ZIP		
			NAME	STREET ADDRESS	CITY	ZIP		
	<b>PERSONAL INFORMATION</b>		NAME		RELATIONSHIP TO APPLICANT	<input type="checkbox"/> OWNER <input type="checkbox"/> OFFICER/ STOCKHOLDER <input type="checkbox"/> MEMBER/ MANAGER <input type="checkbox"/> PARTNER		
	HOME ADDRESS		CITY	STATE	ZIP	HOME PHONE ( )		
	<b>HAVE YOU: EXPLAIN ALL YES ANSWERS:</b>		EVER FAILED IN BUSINESS <input type="checkbox"/> YES <input type="checkbox"/> NO		EVER DECLARED BANKRUPTCY <input type="checkbox"/> YES <input type="checkbox"/> NO		PENDING OR PRIOR TAX LIENS <input type="checkbox"/> YES <input type="checkbox"/> NO	
	DO YOU OWN REAL PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE IN NAME OF:	VALUE	LOAN BALANCE	ENCUMBRANCE OWING TO NAME AND ADDRESS		
	REAL PROPERTY: ADDRESS		DRIVER'S LICENSE NO.		SOCIAL SECURITY NO.	SPOUSE'S S.S.N.		
	<b>PERSONAL REFERENCES WHO HAVE KNOWN YOU THREE YEARS OR MORE (NOT RELATIVES)</b>		NAME	STREET ADDRESS	CITY	PHONE ( )		
			NAME	STREET ADDRESS	CITY	PHONE ( )		
	<b>NEAREST RELATIVE NOT RESIDING WITH YOU</b>		NAME	STREET ADDRESS	CITY	PHONE ( )		
<b>PERSONAL BANK REFERENCE</b>		BANK	STREET ADDRESS	CITY	ACCOUNT NUMBER			
<b>ADDITIONAL OWNER, PARTNER OR MEMBER AS REQUIRED</b>								
<b>PERSONAL INFORMATION</b>		NAME		RELATIONSHIP TO APPLICANT	<input type="checkbox"/> OWNER <input type="checkbox"/> OFFICER/ STOCKHOLDER <input type="checkbox"/> MEMBER/ MANAGER <input type="checkbox"/> PARTNER			
HOME ADDRESS		CITY	STATE	ZIP	HOME PHONE ( )			
<b>HAVE YOU: EXPLAIN ALL YES ANSWERS:</b>		EVER FAILED IN BUSINESS <input type="checkbox"/> YES <input type="checkbox"/> NO		EVER DECLARED BANKRUPTCY <input type="checkbox"/> YES <input type="checkbox"/> NO		PENDING OR PRIOR TAX LIENS <input type="checkbox"/> YES <input type="checkbox"/> NO		
DO YOU OWN REAL PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE IN NAME OF:	VALUE	LOAN BALANCE	ENCUMBRANCE OWING TO NAME AND ADDRESS			
REAL PROPERTY: ADDRESS		DRIVER'S LICENSE NO.		SOCIAL SECURITY NO.	SPOUSE'S S.S.N.			
<b>PERSONAL REFERENCES WHO HAVE KNOWN YOU THREE YEARS OR MORE (NOT RELATIVES)</b>		NAME	STREET ADDRESS	CITY	PHONE ( )			
		NAME	STREET ADDRESS	CITY	PHONE ( )			
<b>NEAREST RELATIVE NOT RESIDING WITH YOU</b>		NAME	STREET ADDRESS	CITY	PHONE ( )			
<b>PERSONAL BANK REFERENCE</b>		BANK	STREET ADDRESS	CITY	ACCOUNT NUMBER			

## INDEMNITY AGREEMENT — READ CAREFULLY

Each of the undersigned hereby affirms that the foregoing statements made and answers given are the truth and are made to induce Developers Surety and Indemnity Company and/or Indemnity Company of California (hereinafter called Surety) to execute or procure the execution of any and all of the bonds described therein, and any extension, modification, or renewal thereof, addition thereto, or substitution therefore. Each of the undersigned further affirms that he understands the bond applied for is a credit relationship, and hereby authorizes Surety or its authorized agent, Insko Insurance Services, Inc., to gather such credit information it considers necessary and appropriate for purposes of evaluating whether such credit should be granted.

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

1. To pay upon demand; and to indemnify and keep Surety indemnified from:
  - a. all loss, contingent loss, liability and contingent liability claim, expense, including attorneys' fees, for which Surety may become liable or contingently liable by reason of such suretyship, whether or not Surety has paid same at the time of demand; and
  - b. to pay Surety an advance premium for the first year or a fractional part thereof that is fully earned and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee.
2. Surety shall have the exclusive right to determine whether any claim or suit shall, on the basis of liability, expediency or otherwise, be denied, paid, compromised, defended or appealed. An itemized statement of payments made by Surety for loss, contingent loss, liability or contingent liability, and/or expense, sworn to by an officer of Surety, or the voucher or vouchers for such payments, shall be **prima facie** evidence of the obligation of the undersigned to reimburse Surety.
3. The parties agree that at all times the place and formation of the suretyship herein applied for and the place of performance of any and all obligations that might arise under it shall be the County of Orange, State of California.
4. Each of the undersigned agrees to pay the full amount of the foregoing regardless of (a) the failure of the principal to sign any such bond or (b) any claim that other indemnities, securities, or collateral was to have been obtained or (c) the release, return or exchange by Surety with or without the consent of the undersigned, of any indemnity, security, or collateral that may have been obtained or (d) the fact that any party signing this instrument is not bound for any reason.
5. The undersigned hereby expressly waive notice from Surety of any claim or demand made against Surety or the principal under the bond, or of any information Surety may receive concerning the principal, or bond. Surety shall have the right to decline any or all bonds herein applied for, and shall have the right to withdraw from, or cancel, or procure its release from such suretyship at any time, all without incurring any liability to the undersigned.
6. Whenever used in this instrument the plural term shall include the singular and the singular shall include the plural, as the circumstances require. If any portion of this agreement be in conflict with any law controlling the construction hereof, such portion of this instrument shall be considered to be deleted and the remainder shall continue in full force and effect.
7. If this transaction is conducted by facsimile or electronic communication, the undersigned will retain custody of the original document. In the event of any controversy over the content of this document, a facsimile, photocopy, electronic or optical reproduction shall be admissible in a court of law with the same force and effect as the original.
8. This agreement is a continuing obligation of the principal and indemnitor and may be terminated only upon written notification delivered by registered mail to Surety at it's home office. Such notice shall state the effective date of such termination, which shall, in no event, be less than 30 days following receipt of such notice by Surety. No termination of this agreement shall relieve any principal or indemnitor of any obligation or liability under this agreement, or the bond, occurring during the term of this agreement, regardless of when such obligation or liability shall become known to Surety; nor shall termination of this agreement by any indemnitor in any way affect the obligation or liability of any other indemnitor or principal who has not given such notice.

In consideration of the execution by Developers Surety and Indemnity Company and/or Indemnity Company of California of the suretyship applied for, each of the undersigned, jointly and severally, agrees to be bound by all of the terms of the foregoing indemnity agreement, executed by the applicant, as fully as though each of the undersigned were the sole applicant named herein, and admit to being financially interested in the performance of the obligation which the suretyship applied for is given to secure.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

### IMPORTANT

If a Sole Proprietorship, applicant must sign. Applicant and spouse must sign personal indemnity below.  
 If a Partnership, two authorized partners must sign on behalf of the firm. The two authorized partners and their spouses must sign personal indemnity below.  
 If a Corporation, two corporate officers must sign below on behalf of firm. Owners of the corporation and their spouses must sign personal indemnity below.  
 If a Limited Liability Company, two managers/members must sign on behalf of the company. The two authorized manager/members and their spouses must sign personal indemnity below.

(Company Name)	(Indemnitor)
By: _____	_____
(Name/Title)	(Signature)
(Signature)	(Spouse's Signature)
By: _____	_____
(Name/Title)	(Indemnitor)
(Signature)	(Signature)
	(Spouse's Signature)

AGENCY	CONTACT PERSON	PHONE	PRODUCER CODE	<input type="checkbox"/> AGENCY BILL <input type="checkbox"/> DIRECT BILL
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**PERSONAL FINANCIAL STATEMENT  
NOT TO BE USED FOR BUSINESS STATEMENTS.**

**To induce COMPANY to become surety for the Undersigned, or to accept  
the Undersigned as Indemnitor, the Undersigned submits the following Financial Statement**

Personal financial statement of \_\_\_\_\_ SS. NO. \_\_\_\_\_  
(Name)

(Street Address, City, State, Zip)  
HOME PHONE NO. ( ) \_\_\_\_\_ BUS. PHONE NO. ( ) \_\_\_\_\_

NAME OF SPOUSE \_\_\_\_\_

AS OF \_\_\_\_\_  
(Date)

CURRENT ASSETS		CURRENT LIABILITIES	
Cash on hand (not in bank) . . . . .		Notes payable to (names and addresses):	
Cash in following banks (names and addresses):		.....	
.....		.....	
.....		Sales Contracts & Chattel Mtgs. (Sch. 6) . . . . .	
Stocks and bonds (Schedule 1) . . . . .		Accounts payable . . . . .	
Accounts receivable (Schedule 2) . . . . .		Current portion of long term debt . . . . .	
Notes receivable (Schedule 3) . . . . .		Other current liabilities (Schedule 6) . . . . .	
Other current assets (Schedule 6)		.....	
.....		.....	
.....		Current Year's Income Taxes Unpaid . . . . .	
.....		Prior Year's Income Taxes Unpaid . . . . .	
.....		Real Estate Taxes Unpaid . . . . .	
.....			
<b>TOTAL CURRENT ASSETS</b>		<b>TOTAL CURRENT LIABILITIES</b>	
<b>FIXED ASSETS</b>		<b>LONG TERM LIABILITIES</b>	
Real estate (Schedule 4):		Real estate debt (Schedule 4):	
Residence . . . . .		Residence . . . . .	
Other . . . . .		Other . . . . .	
Cash value of life insurance (Schedule 5) . . . . .		Borrowed on life insurance (Schedule 5) . . . . .	
.....		.....	
Other assets and investments (Schedule 6) . . . . .		Other long term debt (Schedule 6) . . . . .	
.....		.....	
.....		.....	
.....		.....	
.....		<b>TOTAL LONG TERM LIABILITIES</b>	
<b>TOTAL FIXED ASSETS</b>		<b>NET WORTH</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES AND NET WORTH</b>	

CONTINGENT LIABILITIES

FOR ENDORSEMENTS OR GUARANTEES \$ \_\_\_\_\_ FOR OTHER PURPOSES \$ \_\_\_\_\_

GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_

**1. STOCKS AND BONDS**

Name of Security	No. Shares	If any pledge, State to Whom and for What Purpose	Dividends Paid Last Two Years	Market Value	Book Value
<b>TOTALS</b>				\$	\$

**2. ACCOUNTS RECEIVABLE**

Name and Address (street and city) From Whom Due	For What is it Due	When Sold	When Due	Amount
<b>TOTAL</b>				\$

**3. NOTES RECEIVABLE**

Name and Address (street and city) From Whom Due	For What Due	How Secured	Date	Maturity	Amount
<b>TOTAL</b>					\$

**4. REAL ESTATE**

Description of Property	Title in Name of	Market Value	Cost	Date Acquired	Amount Encumbrance	Monthly Payments	Monthly Income
<b>TOTAL</b>							

**5. LIFE INSURANCE – CASH VALUE**

Name of Company	Policy Number	Name of Insured	Beneficiary	Face Value	Cash Value	Amount Borrowed

**6. OTHER ASSETS AND LIABILITIES**

Other Current Assets (itemize)	Other Current Liabilities (itemize)	Amount

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with other, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature \_\_\_\_\_

Date Signed \_\_\_\_\_, \_\_\_\_\_.

Signature \_\_\_\_\_