



## EXPRESS CONTRACT BOND REQUEST

### Contractor Information

Type of Business:  Proprietorship  Partnership  "C" Corporation  "S" Corporation  LLC  LLP

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Type of work performed: \_\_\_\_\_

Job Size Experience (list two largest contracts completed in last five years):

Owner or General	Contract Price	Gross Profit	Year Completed

Has there ever been a claim filed under any bond issued on your behalf?  Yes  No If yes, please attach explanation.

### Indemnitor Information (provide for all owners; use additional sheets if necessary)

Name: _____	Name: _____
Address: _____	Address: _____
City: _____ State: _____ Zip Code: _____	City: _____ State: _____ Zip Code: _____
SSN: _____ Date of Birth: _____	SSN: _____ Date of Birth: _____
Ownership %: _____	Ownership %: _____
Spouse Name: _____	Spouse Name: _____
SSN: _____ Date of Birth: _____	SSN: _____ Date of Birth: _____
Ownership %: _____	Ownership %: _____
Monthly Household Income: _____	Monthly Household Income: _____

Any owners, partner, officer, or members failed in business or declared bankruptcy?  Yes  No

Have you ever been arrested, indicted, sentenced or imprisoned?  Yes  No

**Bond Information** (this application is not intended for Subdivision bonds, Asbestos Abatement, Completion, Hazardous Materials, Software Development or Multi-Year Service Contract)

<input type="checkbox"/> Bid Bond	<input type="checkbox"/> Performance & Payment Bond
Bid Date: _____	Contract Date: _____
Bid % or Bid Amount: _____	Contract Price*: _____
Estimated Contract Price: _____	Start Date: _____
Estimated Start Date: _____	Completion Date: _____
Estimated Completion Date: _____	Backlog (total estimated cost-to-complete): _____
Liquidated Damages: _____ /day	Negotiated Contract: <input type="checkbox"/> Yes** <input type="checkbox"/> No
Maintenance Period: _____ years	Maintenance Period: _____ years
Backlog (total estimated cost-to-complete): _____	Bidder #2: _____ Bidder #3: _____
Obligee: _____	
Obligee Address: _____ City: _____ State: _____ Zip Code: _____	
Project Location: _____	
Job Description: _____	
If Private Owner, Financing by: _____	

\* For aggregate bonded liability in excess of \$350,000, please attach latest CPA prepared fiscal year-end financial statement or internally prepared statement with supporting tax return along with a current personal financial statement.

Any person who knowingly and with intent to defraud any insurance company or person files an application containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime under applicable law.