



Surety Solutions Insurance Services, Inc.

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CA, DOI #OE72611

e-mail compiled document to contract@surety1.com

For Single Bonds to \$350,000
Aggregate Programs to \$700,000

CONTRACTOR DATA

Company Federal ID #
Type of Business: Partnership S Corporation C Corporation LLC LLP Sole Proprietorship
Company Name Phone
Company Address City State Zip
Type of Work Date Started in Business
Contractor's License No(s) Email Address

OWNER DATA / INDEMNITORS (Provide the information below on all owners; use additional sheet if necessary)

Name Address City/State/Zip SS# DOB % of Business Ownership Married Yes No Spouse Name SS# DOB Phone/Cell No. Do you Own/Rent? Purchase Price Value? Owed

BOND REQUEST DATA

If no bond is needed at this time, but only prequalification for future bonding, check here
Anticipated Start Date Time for Completion Maintenance Period
Obligee (Who is requiring the contractor get a bond?)
Obligee Address City State Zip
Job Description

This application is not intended for use in connection with Subdivision or Site Improvement over \$100,000, Multi-Year Contracts where term of contract is over 2 years, Service Contracts, Asbestos Abatement Contracts, Completion Contracts, or Hazardous Materials Contracts.

Check and Complete: (For private jobs or subcontracts over \$100,000, please enclose a copy of the contract and bond form)

Bid Bond
Bid Date
Estimated total amount of bid: \$
Bid Bond % or flat amount:

Status of Outstanding Bid or Performance Bonds:

Bond No. Bid Awarded:
Bond No. Bid Awarded:

Performance & Payment Bond Supply Bond
Subcontractor Performance & Payment Bond
Stand Alone Maintenance Bond
Contract Price \$
Contract Date (Date contract is signed)
Bid Secured by: Check Bond Negotiated
Estimated gross profit margin?
List Subcontractors >\$100K?
Next two lowest bidders
\$ \$

BOND FORM DATA

PHLY Bond Form Obligee Form (Send copy for Review) AIA Form State Form (Send copy for Review) Federal Contract#

COMPANY BACKGROUND DATA:

Yes No Has company, affiliated company, or any owner ever filed for bankruptcy?

Yes No Are the company and/or owners delinquent on any state and/or federal income and payroll taxes?

Yes No Has any owner ever been convicted of a crime other than a traffic violation?

Yes No Is the company without all required and current contractor licenses?

Yes No Has company, affiliated company, or any owner been associated with a company that caused a surety loss?

Type of trades you perform: _____

Territory in which you perform work (present and planned) _____

Trades subcontracted: _____

FINANCIAL DATA

- If single bond request or current aggregate program exceeds \$250,000, please provide:
 - o Current Personal Financial Statement on all owners/stockholders
 - o Current Business Financial Statement
- Total Value of Current Contracts on Hand? _____ Current Cost to Complete? _____
- Current Company Net Worth? _____ Current Company Net Income/(Loss)? _____
- Current Company Cash on Hand? _____ Current Company Bank Line of Credit Line Usage? _____

EXPERIENCE DATA

List the three largest contracts completed in the last five years:

Owner or General	Kind of Work	Location City/County/State	Contract Price	Year Completed	Final Gross Profit

List the two largest jobs you presently have underway, giving the following information:

Owner	Kind of Work	Location City/County/State	Contract Price	% of Completion	Estimated Gross Profit	Date to be Completed

OPERATIONS DATA

Most Recent and/or Current Surety _____

Liability Insurance Company and Limits _____ Expiration Date ____/____/____

Current Bank Name and Line of Credit Limits _____ Expiration Date ____/____/____

GENERAL DATA

Explain all "yes" answers fully on the explanation page attached:

- Yes No Are there other companies owned by stockholders/owners of applicant?
- Yes No Are there any assets held in trust or pledged by company of stockholders/owners?
- Yes No Has the company been denied bonding within the last 60 days? If so, by whom and for what reason?
- Yes No Have you ever received a contract or commercial surety bond from PHLI Insurance Company?
- Yes No Has your company ever failed to complete any work awarded to them?
- Yes No Are there any pending lawsuits/claims/liens/business or personal?
- Yes No Do you have any current bonded jobs open?

****ALL APPLICANTS ARE SUBJECT TO CREDIT REVIEW**

Fair Credit Reporting Act Notice: In making this application for surety it is understood that an investigative consumer report may be prepared whereby pertinent information concerning your character, reputation, personal characteristics and mode of living may be obtained. Information as to the nature and scope of this report may be obtained upon written request.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

All new applicants must have a completed and signed indemnity form on file with Philadelphia Indemnity Insurance Company.



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CONSENT TO PULL CONSUMER CREDIT REPORTS

Any person who knowingly and with the intent to defraud any insurance company or person files and 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. The applicants and indemnitors certify the truth of all statements in the application.

By submitting the application, you authorize Surety Solutions Insurance Services, Inc. to provide information provided by you to the insurance companies represented by Surety Solutions Insurance Services, Inc., along with any additional insurance companies or insurance intermediaries necessary to complete your application for surety bond(s), and / or insurance. You also authorize Surety Solutions Insurance Services, Inc., the insurance companies represented by Surety Solutions Insurance Services, Inc., along with any additional insurance companies or insurance intermediaries necessary to complete your application for surety bond(s), and/or insurance to request from one or multiple credit bureaus reporting agencies, your credit bureau report including any ancillary credit scores or ratings and to check your credit and employment history Understood and Agreed to:

Name of applicant (print): _____

Signature of applicant: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of co-applicant or spouse (print): _____

Signature of applicant: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of co-applicant or spouse (print): _____

Signature of applicant: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

If you would rather e-mail completed and signed document, send to contract@surety1.com