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**Bond Request Form**

**Please email fully completed and signed Bond Request Form with all contracts and supporting documentation (including special forms and requirements) to: mcerqueira@serviceinsurancecompany.com**

Business (a/k/a “Principal”) Name:

Email:

Type of Bond: Bid    Performance     Maintenance/Consent to Final Payment

Bid Bond #:       Performance Bond #:

Obligee (Entity requiring the Bond (as it will appear on the Bond Form:

Obligee Phone:       Obligee Email:

Contract Number:      Project Name:     

Total Bid/Contract Amount: $      Bid Percentage:    %

If Multiyear Contract, price per year: Year 1: $     Year 2: $     Year 3: $

Date of Bid:   **/**   **/**20  Contract Start Date:   **/**  **/**20   Contract Completion Date:   **/**  **/**20

Project Location:      State:    Delay Damages? Yes   No   Amount: $

Next two lowest bidders: (If Performance Bond, please provide Bid Results)

1. Company:       Bid Amount: $

2. Company:       Bid Amount: $

a. Does the Principal have a greater than two year maintenance obligation on this Bond? Yes     No

b. Has the Contract Started? Yes    No    If Yes, % Complete:    **%**

c. Does the Principal have any pending low bids? Yes     No    

d. Does the Principal have any bonds issued by another bonding company? Yes     No    

e. Does the Principal have any pending disputes, lawsuits, unpaid judgments or liens (including any tax liens)?

Yes     No

f. Does the Principal have any accounts payable in excess of 120 days due to any vendor, supplier or unions?

Yes     No

If “Yes”, for any a-f, please provide details:

*\*\* You must review all bonds and related documents prior to bid. The Service Insurance Company is not liable for rejected bonds. \*\**

The Principal and indemnitors certify the truth of all statements in the Application and Bond Request Form and authorize The Service Insurance Company to verify all reported information and to obtain additional information from any source, including obtaining personal credit reports.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. By submitting this

Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:    **/**   / 20

Principal Print or Type Name:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**80 Main Street, Suite 330 The Service Insurance Company, Inc.**

**West Orange, N.J. 07052**  (in CT, GA, KY, MA, MD, MS, NH, NJ, NY, PA, RI, TN & WV)

**N.J. Phone: (973) 731-7650**

**N.J. Fax: (973) 731-7889 Service Guarantee and Surety Company**

(in AL, FL and VA by: The Service Insurance Company, Inc.)

**35 Pinelawn Road, Suite 111-E**

**Melville, N.Y. 11747 The Service Insurance Company, Inc. d/b/a Service Guarantee and Surety Company**

**N.Y. Phone: (631) 343-4305** (in DE, NC, SC and the District of Columbia)