



THE SERVICE INSURANCE COMPANY, INC.
 (d/b/a Service Guarantee and Surety Company in DC, DE, NC & SC)
 Service Guarantee and Surety Company (used in FL by: The Service Insurance Company, Inc.)
 Service Guarantee and Surety Co. (used in VA by: The Service Insurance Company, Inc.)
80 MAIN STREET, SUITE 330, WEST ORANGE, NJ 07052
973-731-7650 (P) 973-731-7889 (F)

CONTRACTOR'S SURETY APPLICATION

_____ Email Address: _____
Contractor (Known as Principal) as name appears on tax return

Address: _____ Phone: _____

Is the principal or its owners or family members connected with other companies as a subsidiary, parent, holding or affiliate in any way, including prior companies? _____ Y / N _____ Details: _____

OWNERS AND KEY PERSONNEL:
 (Please Complete)

<i>Name:</i>	<i>Married</i>	<i>DOB</i>	<i>Position</i>	<i>% of Ownership</i>	<i>Social Security</i>
_____	Y / N	_____	_____	_____	____/____/____
_____	Y / N	_____	_____	_____	____/____/____
_____	Y / N	_____	_____	_____	____/____/____
_____	Y / N	_____	_____	_____	____/____/____

In what class of construction do you specialize in? _____ Date Formed: _____

Annual Sales (last 3 years) 20__ \$ _____ 20__ \$ _____ 20__ \$ _____

LIST THE FOUR LARGEST CONTRACTS COMPLETED IN THE LAST 3 YEARS:

<i>Email Address of Contact Person</i>	<i>Type of Work</i>	<i>Contract Price</i>	<i>Year</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

NAME OF PRESENT AND PRIOR SURETIES: Name: _____ Agent: _____

Has this principal including any member, or any prior company you were employed by or have or had ownership in (or any owner including family members) :

- Ever received notice of default or defaulted on a contract forcing a surety to suffer a loss or pay a claim (including receiving written notice of failure to perform to pay suppliers & subcontractors) _____ Y _____ N
- Are you currently on notice of a pending default (failure to perform or to make payments) on a bonded project? _____ Y _____ N
- Ever filed bankruptcy _____ Y _____ N

4. Ever had a criminal conviction? _____Y _____N
5. Are there any unresolved lawsuits involving applicant/principal or spouse or a related business or any unpaid judgments or liens against applicant/principal or spouse, including judgments or liens in favor of any tax authority, IRS, any state agency or vendor or any pending or prior disputes or civil litigation?
_____Y _____N

If yes to any of the above explain: _____

- Have you been bonded or applied to other surety companies within the last twelve (12) months? _____Y _____N
- Any disputes on contracts including money due to your firm in excess of 120 days? _____Y _____N AMOUNT:\$_____
- Any disputes with vendors or money you owe vendors/suppliers in excess of 120 day? _____Y _____N
- Are there any past due notices for prevailing wages, labor, union benefits, or supplier's notices against your company? _____Y _____N

If yes to any of the above please explain: _____

If additional space is required for any answers, please attach additional signed pages.

Bank Credit Line? Y / N Bank Name: _____ Amount available:
\$_____

LIST TOP SUPPLIERS AND SUBCONTRACTORS:

<u>NAMES</u>	<u>Material/Service</u>	<u>City & State</u>	<u>Email Address</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

THIS IS TO CERTIFY THAT ALL OF THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND TO THE BEST OF MY/OUR KNOWLEDGE THERE ARE NO PRIOR, PENDING, OR NOTICES OF ANY DEFAULTS OR CLAIMS ON THIS OR ANY RELATED ENTITY, EXCEPT FOR WHAT HAS BEEN PREVIOUSLY DISCLOSED TO SERVICE INSURANCE COMPANY. THE FOREGOING STATEMENT APPLIES TO ANY OTHER OR PRIOR BUSINESS(ES) I/WE OR ANY IMMEDIATE FAMILY MEMBER HAS/HAD OWNERSHIP IN.

I/WE AUTHORIZE THE COMPANY TO INVESTIGATE/VERIFY ALL BUSINESS AND PERSONAL DOCUMENTATION SUBMITTED WITH AND REPRESENTATIONS MADE IN CONNECTION WITH ANY SURETY REQUEST AND TO CHECK MY/OUR CREDIT WITH ANY CREDITORS AND/OR LENDING INSTITUTIONS OR CREDIT BUREAUS

ERRORS & OMISSIONS

I/WE WILL VERIFY THE ACCURACY OF ALL BONDS AND RELATED DOCUMENTS AND WILL NOTIFY SERVICE INSURANCE COMPANY PRIOR TO THEIR SUBMISSION. I/WE UNDERSTAND THAT SERVICE INSURANCE COMPANY IS NOT RESPONSIBLE OR LIABLE FOR REJECTED BONDS OR ANY MISTAKES, ERRORS OR OMISSIONS MADE AND I/WE AGREE TO HOLD SERVICE INSURANCE COMPANY HARMLESS SHOULD A BID OR BOND BE REJECTED.

FRAUD STATEMENT

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

I will check all bonds and related documents prior to submitting bids, or other types of bonds. I understand that The Service Insurance Company is not responsible or liable for rejected bonds or mistakes and I agree to hold The Service Insurance Company harmless should a bid or bond ever get rejected.

SIGNED THIS _____ DAY OF _____

Signature Name and Title

Signature Name and Title

Agent/ broker _____ Name of Insurance Agency: _____
Signature

***For a more comprehensive response, please include latest personal and business tax returns, financial statements and bank statements.**