

SHORT FORM BOND APPLICATION

Bond Type ___ Bid Bond. ___ Performance & Payment Bond. ___ Maintenance Bond. ___ License & Permit Bond.

Principal / Contractor Information

Business (Legal) Name _____ FEIN _____ eMail _____

Business Address _____ Phone No _____

Type of Contractor _____ Date Business Started ____/____/____

___ (S) Corporation. ___ (C) Corporation. ___ Partnership. ___ Sole Proprietorship. ___ LLC. ___ LTD.

Personal / Owner Information 1

Name _____ Address _____

% Ownership _____ Title _____ DOB _____ SS# _____

Married ___ Yes ___ No. Spouses Name _____ DOB _____ SS# _____

Approximate Credit Score _____ Home Phone _____ eMail _____

Personal / Owner Information 2

Name _____ Address _____

% Ownership _____ Title _____ DOB _____ SS# _____

Married ___ Yes ___ No. Spouses Name _____ DOB _____ SS# _____

Approximate Credit Score _____ Home Phone _____ eMail _____

Operations Information

Type of Work Performed _____

Trades Performed in House _____ Territory of work (Present & Planned) _____

Subcontracted Trades _____

Liability Insurance Limits _____ Umbrella/Excess Insurance Limits _____
(Please Provide a Current Certificate)

Bank Line of Credit ___ Yes ___ No. Total Amount _____ Currently Available _____

Bond Request Information Bond Amount \$ _____

Owner/Obligee _____
(Bond Payable To)

Owner/Obligee Address _____

Project Description and Number _____

Project Address _____

Bid Date & Time _____ Estimated Contract Price _____ Bid Bond Amount or % _____

Completion Time _____ Penalties/LD _____ Maintenance Period _____ Type of Bond Form? _____

Bid Results

Estimated Breakdown

1 st _____	Material _____	Overhead _____
2 nd _____	Labor _____	Miscellaneous _____
3 rd _____	Subcontractors _____	Total _____

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Jobs in Progress

Owner/General Contractor	Type of Work	Project Location	Contract Amount	% Complete

Largest Completed Project

Owner/General Contractor	Type of Work	Project Location	Contract Amount	% Profit

Supplier & Subcontractor Information

Name of Account Payable	Amount Owed	% Over 60 Days	Contact	Phone #	

Difficulties, Disputes, Problems.

Officer, owner
or partner
Yes / No

Company
Yes / No

• Ever failed to complete a job?		
• Every declared personal or corporate bankruptcy?		
• Been delinquent in paying taxes?		
• Been denied bonding in the past 3 years?		
• Involved in a claim with a surety?		
• Any personal or corporate assets held in a trust or escrow?		
• Any personal or corporate assets restricted for any purpose? (i.e collateral for loan)		
• Been bonded in the past - if so by whom?		
• Are you currently insured?		

Checklist of information Needed:

- _____. Completed Questionnaire.
- _____. Current Corporate Tax Returns.
- _____. If this is a Private Project Provide a Copy of the Contract.

I/We hereby certify and declare that the above information accurately represents my company condition to the best of my knowledge and belief and I/We hereby authorize and request any person, firm or corporation to furnish any credit or character information requested by Coverages Unlimited Incorporated concerning any transaction with the undersigned: Coverages Unlimited Incorporated is authorized to obtain information to confirm financial information and may furnish copies of the foregoing statement and any information which it contains to other companies for the purpose of evaluating surety credit.

Requested By _____ Date _____
Name & Title

NOTE: Before any final bonds can be issued a General Agreement of Indemnity must be executed.