

Bond Number \_\_\_\_\_

Name of Agent \_\_\_\_\_

**Fidelity and Deposit Company of Maryland**  
**Colonial American Casualty and Surety Company**  
Home Office: P.O. Box 1227 Baltimore, MD 21203

**Bond Application**  
**(Not to be Used for Construction Bonds)**

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**Section I – General Information To Be Completed By All Applicants**

1. Name of Applicant: \_\_\_\_\_  
 Individual(s)     Proprietorship     Partnership     Corporation     S Corporation
2. Address/Telephone Number: \_\_\_\_\_ Zip Code \_\_\_\_\_
3. Social Security or Tax I.D. No. \_\_\_\_\_ Annual Income \_\_\_\_\_
4. Business/Occupation \_\_\_\_\_ Started \_\_\_\_\_  
*(If Retired, list previous occupation)*
5. Kind of Bond \_\_\_\_\_ Amount \_\_\_\_\_ Eff. Date \_\_\_\_\_
6. To Whom Is Bond Given (Obligee) \_\_\_\_\_
7. Address of Obligee \_\_\_\_\_

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**Section II – Complete For All License, Permit, Custom, Internal Revenue and Other Miscellaneous Bonds**

1. COMPLETE SECTIONS I, VIII AND IX.
2. Attach Copy of Bond or Describe the Nature of Obligation In The Space Provided (NOTE: If bond guarantees another agreement or document, attach copy.)
3. Sign Application, on page 4.

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**Section III – Complete For All Court Bonds** (e.g. Appeal, Attachment, Discharge Attachment, Garnishment, Injunction, Release of Mechanic's Lien, Supersedeas, etc.)

1. COMPLETE SECTIONS I, VIII AND IX.
  2. Exact Title of Case: \_\_\_\_\_
  3. Describe Facts of Case and Nature of Legal Proceedings (Note: Bonding Company May Require Copies of Legal Documents Such as Judgment Being Appealed, Motions For Injunctive Relief or Prejudgment Seizure of Property):
  4. List Amount of Liability, Claim Judgment, and/or Value of Property in Controversy: \$ \_\_\_\_\_
  5. Describe Property Being Seized and Nature of Applicant's Interest in Same, if Applicable:
  6. Bond To Be Filed In the \_\_\_\_\_ Court Of \_\_\_\_\_ County, State of \_\_\_\_\_
  7. Are You Involved in Other Litigation?  Yes  No If yes, briefly explain:
  8. Name of Attorney: \_\_\_\_\_  
Address and Phone No. of Atty.: \_\_\_\_\_
  9. Sign Application, on page 4.
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**Section IV – Complete For Probate and Other Fiduciary Bonds** (e.g. Executor, Administrator, Guardian, Conservator, Trustee, etc.) **Excluding Those Filed in Bankruptcy or Insolvency Proceedings.**

1. COMPLETE SECTIONS I, VIII AND IX. (Note: List only Total Assets and Liabilities in Section VIII.)
2. Bond To Be Filed In the \_\_\_\_\_ Court Of \_\_\_\_\_ County, State of \_\_\_\_\_
3. Name of Ward/Deceased: \_\_\_\_\_ Date of Birth \_\_\_\_\_
4. Was a Will Found? Yes No If yes, attach copy.
5. Applicant's Relationship to Ward/Deceased: \_\_\_\_\_
6. List All Parties Interested In The Estate (i.e. Heirs, Legatees, Devisees, Distributes or Trust Beneficiaries)
  
7. Name of Attorney: \_\_\_\_\_  
Address and Phone No. of Attorney: \_\_\_\_\_
8. Estate Assets: Cash \$ \_\_\_\_\_; Stocks and Bonds (Include Description) \$ \_\_\_\_\_  
Other: ( ): \$ \_\_\_\_\_; Real Estate \$ \_\_\_\_\_
9. Total Liabilities of the Estate: \_\_\_\_\_
10. Have You Given Bond In The Estate Before? Yes\* No
11. Have You Had Prior Possession of the Assets? Yes\* No
12. Are You Indebted To The Estate? Yes\* No
13. Is There a Going Business In The Estate? Yes\* No
14. Will You Give The Surety Joint Control Over the Estate Assets? Yes\* No
15. Sign Application, on page 4.

**\* (Note: IF THE ANSWER TO ANY ONE OR MORE OF QUESTIONS 10, 11, 12 OR 13 IS YES, PROVIDE COMPLETE DETAILS ON A SEPARATE SHEET OF PAPER.)**

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**Section V – Complete For All Trustees, Receivers and Other Fiduciaries In Bankruptcy and Insolvency Proceedings**

1. COMPLETE SECTIONS I, VIII AND IX. (Note: List Only Total Assets and Liabilities in Section VIII.)
2. Title of Case as Docketed or Name of Bankrupt/Debtor
3. Will Assets be Liquidated and Distributed to Creditors or is Reorganization Anticipated?
4. Attach Copy of Petition For and/or Order of Appointment If Requested.
5. Sign Application, on page 4 and attach resume, if requested.

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**Section VI – Complete For Lost Instrument Bond**

1. COMPLETE SECTIONS I, VIII AND IX.
2. Describe Lost Instrument In Detail \_\_\_\_\_
  
3. Value of Lost Instrument: Par \$ \_\_\_\_\_ Market \$ \_\_\_\_\_
4. Is the Instrument Registered, and if so, in whose name? \_\_\_\_\_
5. To Whom Are Dividends Being Paid? \_\_\_\_\_
6. Are You the Absolute Owner of the Lost Instrument and entitled to Immediate Possession Free of All Liens and Claim of any kind whatsoever? Yes No
7. State DEFINITELY whether or not the Instrument Was Endorsed, Assigned, Pledged or Otherwise Hypothecated. If Yes, Explain: Yes No \_\_\_\_\_
  
8. If Instrument Is A Check, has payment been stopped? Yes No If so, when? \_\_\_\_\_
9. Describe Fully the Manner in which the Instrument Was Lost (Including the Time Last Seen) or Attach Affidavit of Loss: \_\_\_\_\_
  
10. Sign Application, on page 4.

**Section VII – Complete For Public Official Bonds**

1. COMPLETE SECTIONS I, VIII AND IX. (Note: List only Total Assets and Liabilities In Section VIII.)
2. Position/Title: \_\_\_\_\_ Appointed or Elected? \_\_\_\_\_ Term: \_\_\_\_\_
3. Have you Previously held this or any Other Public Official Position, and if so, What Position and For What Term?  
\_\_\_\_\_
4. Do you Handle/Withdraw Fund or Write Checks? Yes No Is Countersignature Required? Yes No
5. Name of Depositories: \_\_\_\_\_
6. How Are You Protected Against Depository Liability? \_\_\_\_\_
7. Number of Subordinates \_\_\_\_\_ Do They Have Fidelity Coverage? Yes No With whom and how much? \_\_\_\_\_
8. Who Audits Books and How Often? \_\_\_\_\_
9. Who Reconciles Bank Statements? \_\_\_\_\_
10. Do You Collect Taxes? Yes No If so, are you Liable for Collection? \_\_\_\_\_
11. How Are You Relieved From Tax Liability? \_\_\_\_\_
12. Attach Copies of Last Audit and Depository Designation.
13. Sign Application, on page 4.

**Section VIII – Statement of Applicants Assets, Liabilities and Income As of \_\_\_\_\_ (Note: Check Applicable Section to Determine If Financial Information Is Necessary. If So, Attach CPA Or Other Prepared Statement. If unavailable, complete this section.)**

CURRENT ASSETS		CURRENT LIABILITIES	
Cash	\$	Accounts Payable	\$
Accounts Receivable (Good)		Notes Payable	
Notes Receivable (Good)		Loans From Banks/Others	
Inventory		Accrued Wages and Taxes	
*Stock, Bond, Etc. (market value)		Accruals	
*Other Current Assets		Other:	
<b>TOTAL CURRENT ASSETS</b>	<b>\$</b>	<b>TOTAL CURRENT LIABILITIES</b>	<b>\$</b>
Real Estate (Homestead)		Mortgages	
Real Estate (Other)		Other Liabilities and nature thereof:	
Other Assets and nature thereof:		Capital Stock, in corporation (paid up)	
		Surplus and Undivided Profits	
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>

(\*DESCRIBE ON SEPARATE SHEET OF PAPER)

Sales \$ \_\_\_\_\_ Gross Profit \$ \_\_\_\_\_ Net Profit \$ \_\_\_\_\_

**Section IX – References – Give The Names and Addresses of Three Individuals, Not Related to You, Who Have Known You For Some Years (Note: Check Applicable Section To Determine If References Are Needed)**

Name of References	Address and Telephone Numbers	Occupations

The undersigned hereby represents that the statements made herein as an inducement to the Fidelity and Deposit Company of Maryland or Colonial American Casualty and Surety Company (Hereinafter called Company), their successors and assigns, to execute the bond applied for herein are true, and, should the Company execute said bond and any renewals, continuations, extensions or increases thereof, or any additional bond or bonds in the same proceeding or case, and/or any substitutes therefor, with the same or different conditions, hereby agrees as follows: **FIRST**, To pay the Company in advance the premium for the first year and to pay in advance any renewal or additional premiums which are provided for by the Company rates until the Company is provided with evidence that it is released from all liability on said bond; **SECOND**, to indemnify the Company against all loss, liability, costs, damages, attorney's fees and expenses whatever, which the Company might incur by reason of executing said bond, making an investigation on account thereof, in prosecuting or defending an action thereon, in obtaining a release therefrom, and enforcing this agreement; **THIRD**, The Company shall have the right and is authorized, but not required to: (a) adjust, settle or compromise any claim, demand, suit or judgment upon said bond, unless the undersigned shall request the Company to litigate such claim or demand or to appeal such judgment, and shall deposit with the Company collateral satisfactory to it in kind and amount; (b) to assent to any change in said bond and/or any document referred to therein; **FOURTH**, That in the event of payment, settlement or compromise, in good faith, made as indicated herein, an itemized statement thereof, sworn to by any officer of the Company or the voucher(s) or other evidence of payment shall be *prima facie* evidence of the fact and extent of the liability of the undersigned in any claim or suit thereunder; **FIFTH**, That the Company have the absolute right to cancel said bond if it contains a cancellation clause or procure its release from said bond under any law permitting same and the Company is hereby released from any damage that might be sustained by reason of such cancellation or release; **SIXTH**, that this obligation shall be for the benefit of any company or companies which the Company may procure to execute or join with it in executing such bond, or to assume reinsurance thereon; **SEVENTH**, That nothing herein shall be construed to waive any right or remedy which the Company might have if this instrument were not executed; **EIGHTH**, that if this bond herein applied for is on behalf of two or more principals, then it is agreed and understood that this indemnity shall apply and be binding upon the undersigned, regardless of whether the undersigned or any one or more of them, is by judicial decree or otherwise freed from liability in the case in which the bond herein applied for is required; **NINTH**, That this agreement shall be binding upon the undersigned and each of them whether signing as an applicant or indemnitor, jointly and severally and upon their heirs, administrators, executors, successors, and assigns, and shall be liberally construed as against the undersigned.

**FLORIDA FRAUD STATEMENT:** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony in the third degree.

In Witness Whereof, I (we) hereunto subscribe my (our) name(s) this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

IF INDIVIDUAL, sign here:

Witness: \_\_\_\_\_

IF CO-PARTNERSHIP, co-partnership and all co-partners sign here:

\_\_\_\_\_  
(Name of Co-Partnership)

Witness: \_\_\_\_\_

(Individually and as a co-partner)

Witness: \_\_\_\_\_

(Individually and as a co-partner)

IF CORPORATION, imprint corporate seal and sign here:

\_\_\_\_\_  
Name of Corporation

Witness: \_\_\_\_\_

Secretary

President

**ADDITIONAL INDEMNITY**

In consideration of the Company, its successors and assigns, executing, or procuring the execution of, or refraining from presently exercising its right to cancel, the bond herein applied for, we jointly and severally join in the foregoing agreement; and the undersigned, if a corporation, warrants that it is financially interested in the performance of the obligation which said bond applied for is given to secure, and asserts that it is fully empowered to obligate itself hereby.

Signed, sealed and dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Witness: \_\_\_\_\_

Indemnitor

Witness: \_\_\_\_\_

Indemnitor

**Must be acknowledged before Notary Public by Indemnitor(s).**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally appeared \_\_\_\_\_

to me known to be the person(s) or member(s) of the partnership or officer(s) of the corporation that signed the foregoing instrument and acknowledged the execution of the same to me.

\_\_\_\_\_  
(Notary Public) (SEAL)

My Commission Expires \_\_\_\_\_