



SureTec Motor Vehicle Dealer Bond Application

Bond Eff. Date		Bond amount \$		Who is requiring the bond (Obligee)?	
Name (as it is to appear on the bond)					
Address			City	State	Zip
SS# or Tax ID#		Phone		Fax	
Type of Business <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> S Corp <input type="checkbox"/> LLP <input type="checkbox"/> LLC					
Date business started		No. years experience		Approx. no. of cars sold in 3 month period	
Prior Surety? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>if yes, please give name and reason for change</i>					

Does the business or any principal involved: <i>if yes, attach an explanation</i>			
Have any outstanding collection items or liens?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Had any lawsuits or judgments against them?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever failed in business or declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Ever had a license or bond canceled or denied?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Owner Information to be completed by all owners. For more than two owners, make copies and attach

Name		SSN		Email	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	Home Address	City		State	Zip
Date of Birth		Home Phone	Spouse	Business Ownership	%
Name		SSN		Email	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	Home Address	City		State	Zip
Date of Birth		Home Phone	Spouse	Business Ownership	%

Agency Contact

Agency Recommendation

Agency		<input type="checkbox"/> We are not familiar with the applicant
Contact		<input type="checkbox"/> Applicant has been referred to us for bond placement
Address		<input type="checkbox"/> The agency writes all Applicant's insurance and we highly recommend
Phone	Fax	<input type="checkbox"/> Other
Mobile	Email	

Indemnification Agreement – Read Carefully and Sign

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned individually hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

- That the provided information is true and correct.
- To reimburse SureTec Insurance Company ("Surety") upon demand for all payments made for and to indemnify Surety from: a) all loss, contingent loss, liability and contingent liability, claim, expense, including attorneys' fees and claims adjusting fees, for which Surety shall pay, become liable or shall become contingently liable by reason of such suretyship, whether or not Surety shall have paid same at the time of demand; and b) to pay Surety an advance premium for the first year or a fractional part thereof that is fully earned and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee. c) Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned.
- A facsimile of this Agreement shall be considered an original and shall be admissible in a court of law to the same extent as an original copy.
- Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Houston, Harris County, Texas and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Harris County, Texas.
- Surety is authorized to investigate, at any time, the undersigned's credit, employment history, and department of motor vehicle records. Privacy Notice: All nonpublic personal information gathered pursuant to the application shall not be disclosed except as permitted by law.
- Surety, at its sole discretion and without notice to the undersigned is authorized, but not required, to make or consent to changes in the bond or to issue substitute bonds or renewals thereof and this indemnification shall apply to such change, substitute or renewal bond.
- Regardless of the date of signature, this indemnity is effective as of the date of execution of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).

Important Signature Instructions

- If sole owner, applicant must sign as duly authorized representative. Spouse must sign as additional indemnitor below.
- If a general partnership, an authorized partner must sign as duly authorized representative. All authorized partners and spouses must sign as additional indemnitor below.
- If a corporation, the president must sign as the authorized representative. All stockholders of 10% or more and spouses must sign as additional indemnitor below.

Signed and dated this _____ day of _____, 20____

Print Company Name X _____
(Principal's authorized representative) (Title)

Personal Indemnitors

Witness: _____ X _____
(Signature) (Print Name)

Witness: _____ X _____
(Signature) (Print Name)

Mickey Herman Surety and Insurance Agency

2505 Briarglen Road, Acton CA 93510
 Office: 661-269-2752 Fax: 661-269-2754

PERSONAL FINANCIAL STATEMENT NOT TO BE USED FOR BUSINESS STATEMENTS.

To induce COMPANY to become surety for the Undersigned, or to accept the Undersigned as Indemnitor, the Undersigned submits the following Financial Statement

Personal financial statement of _____ SS. NO. _____
 (Name)

 (Street Address, City, State, Zip)

HOME PHONE NO. () _____ BUS. PHONE NO. () _____

NAME OF SPOUSE _____

AS OF _____, 20_____
 (Date)

CURRENT ASSETS		CURRENT LIABILITIES	
Cash on hand (not in bank)		Notes payable to (names and addresses):	
Cash in following banks (names and addresses):		
.....		
.....		Sales Contracts & Chattel Mtgs. (Sch. 6)	
Stocks and bonds (Schedule 1)		Accounts payable	
Accounts receivable (Schedule 2)		Current portion of long term debt	
Notes receivable (Schedule 3)		Other current liabilities (Schedule 6)	
Other current assets (Schedule 6)		
.....		Current Year's income Taxes Unpaid	
.....		Prior Year's income Taxes Unpaid	
.....		Real Estate Taxes Unpaid	
.....			
TOTAL CURRENT ASSETS		TOTAL CURRENT LIABILITIES	
FIXED ASSETS		LONG TERM LIABILITIES	
Real estate (Schedule 4):		Real estate debt (Schedule 4):	
Residence		Residence	
Other		Other	
Cash value of life insurance (Schedule 5)		Borrowed on life insurance (Schedule 5)	
.....		
Other assets and investments (Schedule 6)		Other long term debt (Schedule 6)	
.....		
.....		
.....		
.....		TOTAL LONG TERM LIABILITIES	
TOTAL FIXED ASSETS		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	

CONTINGENT LIABILITIES

FOR ENDORSEMENTS OR GUARANTEES \$ _____ FOR OTHER PURPOSES \$ _____

GIVE DETAILS _____

1. STOCKS AND BONDS

Name of Security	No. Shares	If any pledge, State to Whom and for What Purpose	Dividends Paid Last Two Years	Market Value	Book Value
TOTALS				\$	\$

2. ACCOUNTS RECEIVABLE

Name and Address (street and city) From Whom Due	For What is it Due	When Sold	When Due	Amount
TOTAL				\$

3. NOTES RECEIVABLE

Name and Address (street and city) From Whom Due	For What Due	How Secured	Date	Maturity	Amount
TOTAL					\$

4. REAL ESTATE

Description of Property	Title in Name of	Market Value	Cost	Date Acquired	Amount Encumbrance	Monthly Payments	Monthly Income
TOTALS		\$	\$	\$	\$	\$	\$

5. LIFE INSURANCE - CASH VALUE

Name of Company	Policy Number	Name of Insured	Beneficiary	Face Value	Cash Value	Amount Borrowed

6. OTHER ASSETS AND LIABILITIES

Other Current Assets (itemize)	Other Current Liabilities (itemize)	Amount

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with other, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature _____
 S.S. No. _____ Date of Birth _____

Signature _____
 S.S. No. _____ Date of Birth _____

Date Signed _____ 19 _____