ALLSTAR

Surety · Fidelity · Insurance

APPLICATION FOR CONTRACT BONDS
$1,000,000 SINGLE / $2,000,000 AGGREGATE

EMERGING CONTRACTOR'S APPLICATION

Contractor Information

☐ Corporation ☐ Proprietorship ☐ Partnership ☐ LLC ☐ LLP ☐ Other

Principal/Company: _____ Federal Tax ID:_____

Address: _____ Phone Number: _____
(Street, City, State, Zip)

Year Company Started: _____ Operations Under Current Management Since: _____ Operating Territory: _____

Type of Construction Performed: _____

Total Current Work On Hand: Number of Jobs: _____ Estimated Cost to Complete: $_____ Number of Bonded Jobs: _____

List any related entities or business interests: _____

Most recent year company: Gross Revenue _____Net Worth_____Net Income_____

- Has the company ever failed to complete a contract? ☐ Yes ☐ No
- Has the company, any stockholder, owner, partner or any affiliate ever filed for bankruptcy or been placed in receivership? ☐ Yes ☐ No
- Are you involved in any litigation? ☐ Yes ☐ No
- Has the company, any officer, owner, or partner been in claim with a surety? ☐ Yes ☐ No

Explain all "Yes" answers:_____

Prior/Current Surety and any bonds outstanding_____

Owner/Indemnitor Information

* Provide information on all Owners and their respective spouses:

Name	Address (No P.O. Box)	Social Security Number	% of Ownership	Yrs. in Construction	Title
Owner:					
Spouse:					
Owner:					
Spouse:					

(If all Owners not listed, please attach additional application)

Contract Bond Information

Obligee/Owner: _____

Address: _____
(Street, City, State, Zip)

Job Description: _____

_____ Estimated Bid Price/Contract: $ _____ Bid Date: _____

Anticipated Start Date: _____ Time For Completion: _____ Liquidated Damages: $ _____ Warranty Period: _____

Bid Results: 1) _____/ $_____ 2) _____/ $_____ 3) _____/ $_____

Bid Bond Amount or Percentage: _____ Performance Bond Amount or Percentage: _____

Payment Bond Amount or Percentage: _____ Maintenance Bond Amount or Percentage: _____

Bond Forms: _____

*Please include copy of the contract and required bond forms if applicable

Bank References

Name of Bank: _____ Date Account Established: _____

Address:_____
(Street, City, State, Zip)

Name of Loan Officer: _____ Phone: _____

Amount of Bank Line: $ _____ Amount of Bank Line Currently in Use: $ _____ Expiration Date:

Job Experience

Largest Work On Hand: $ _____ Year: _____

Please list the two largest contracts completed:

1) Job Description: _____ Contract Price: $_____
   Your Contract With (Owner/General Contractor): _____
   Name of Person to Contact: _____ Phone: _____ Fax: _____
2) Job Description: _____ Contract Price: $_____
   Your Contract With (Owner/General Contractor): _____
   Name of Person to Contact: _____ Phone: _____ Fax: _____

Personal Financial Statement

Confidential

Full Name: _____ Spouses Name: _____

Statement Date As of (mm/dd/yy): _____

Assets	Amount	Liabilities—Current	Amount
Cash on Hand and in Banks		Notes Payable to Banks—Secured	
U.S. Government Securities		Notes Payable to Banks—Unsecured	
Listed Securities		Notes Payable to Relatives	
Unlisted Securities		Notes Payable to Others	
Retirement Funds (eg. IRA's, 401K)		Accounts Payable	
Accounts Receivable—Relatives		Unpaid Income Tax	
Notes Receivable—Relatives		Other Unpaid Taxes	
Real Estate Owned—Residence		Real Estate Mortgages Payable—Residence	
Real Estate Owned—Other		Real Estate Mortgages Payable—Other	
Real Estate Mortgages Receivables		Other Debts—List	
Automobiles and Other Personal Property			
Cash Value Life Insurance			
Other Assets—List		**Liabilities Long Term**	**Amount**
		Real Estate Mortgages Payable—Residence	
		Real Estate Mortgages Payable—Other	
		Other Long Term Debt—List	
Total Assets		**Total Liabilities**	
		(Total Assets - Total Liabilities = Net Worth)	
		Total Liabilities + Net Worth	

**If more than one Owner, attach additional Personal Financial Statement.

The undersigned submits the following as being a true and accurate statement of his or her financial condition on the date shown above and acknowledges that Surety will be relying on the representations made herein.

Agency Information

Agency Name: _____ Agency Phone: _____

Agents Name: _____

- Is the contractor an existing insurance client? ☐ Yes ☐ No
- Are all insurance premiums current? ☐ Yes ☐ No
- Length of relationship between Agent/Contractor: _____

The Undersigned hereby authorizes the Surety to make such pertinent inquiry as may be necessary from financial institutions, credit reporting agencies and all other persons, firms and corporations in order to confirm or verify information referred to or listed herein.

Signed: _____ Date: _____

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