

## **SURETY BOND**

KNOW ALL WEN BY THESE		
That We,	as Principal, and	as
Surety, having a currently exresident agent within the S	ffective certificate of authority to transact a su itate of <u>Alabama</u> do hereby acknowledge ourselv ito the City of Dothan Alabama, Do <b>th</b> an Utilities,	rety business and being a ves to underwrite and be
*Dothan Utilities" in the sur	m of \$ dollars. Said surety be ment and therefore , the Principal and the Su	and is purchased for the
	administrators and assigns and legal representative	
	BACKGROUND	
The Duincipal is in need of an	d has made application to the Finance Department	Utility Callection Division
of City of Dothan, Alabama	n, hereinafter referred to as "Utility Collection Service Address). The Principal furthermore, agree	ns" for utility service at
	promptly when due, then this obligation shall be ve	
	rthermore, agrees to remit payment to Utility Co orth by the City of Dothan Code of Ordinances.	ollections pursuant to the
As stated in the City of Dot	than Code of Ordinances, Section 102-36: Effect	ive October 1, 2002, Any
	ity customer shall be afforded the privilege and as	• •
incentive to furnish a surety monthly average bill and must	bond, in lieu of a cash deposit. This bond must be not be less than \$600.00.	be equal to four times the

## CONDITIONS

- 1. The surety bond will be remitted to the legal division to confirm <u>before</u> the bond is recognized in lieu of a commercial cash deposit for the Principal.
- 2. The surety band will be kept current and upon renewal will be calculated by Utility Collections to ensure the band amount covers four times the current average monthly bill.
- 3. If the Principal has incurred indebtedness to Dothan Utilities for utility service provided prior to the date of this execution of this bond, the liability of the Surety under this bond for all defaults and obligations of the Principal shall be retroactive to the date of commencement of such service.
- 4. It shall be the duty of the Principal to give fifteen (15) days written notice of termination of the utility service in person or by registered mail to the Utility Collections Office, Post Office Box 6728, Dothan, AL 36302, specifying therein, the effective date of such cancellation. It is expressly understood and agreed by all parties that both the Principal and Surety shall remain liable for any utility service provided and any and all payments for bills representing such utility usage, until the above stated requirements have been satisfied.

- 5. The surety shall have the right to cancel this bond with Dothan Utilities upon thirty (30) days written notice served upon the Utility Collections Manager in person or by registered mail, to the preceding address, specifying therein, the effective date of such cancellation.
- 6. The notice of cancellation shall be deemed to be effective only when received by Dothan Utilities and delivered in the manner set forth above. Upon receipt of the cancellation notice the Surety is discharged and released of any further liability, it being understood and agreed, however, that the Principal shall be liable for ALL loss (default) accruing up to the effective date of the notice, in no event however, is the Surety liable for excess of the penalty of this bond.
- 7. In addition to all other amounts payable hereunder, the Surety shall pay all costs and expenses including attorneys' fees incurred by Dothan Utilities in enforcing its rights under this Surety Bond, including those costs, expenses and attorneys' fees incurred by Dothan Utilities in any appellate proceedings.
- 8. The liability of the Surety under this bond shall not be discharged or affected by an extension of time granted to the Principal for the satisfaction of any indebtedness incurred as a result of the utility service provided by Dothan Utilities.
- 9. For any reason, should the surety company cancel the bond and on the effective date of such cancellation notice, the surety is discharged and relieved of any liability. The Principal of said Surety will be liable for immediate payment of a cash deposit equal to twice the monthly average bill.
- 10 The term of this bond will be from the \_\_\_\_ day of \_\_\_\_\_ 20\_\_ and continuous until cancelled under the provisions before stated.

  IN WITNESS WHEREOF, we the Principal and Surety, have hereunto set our hands and seals this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_.

  ATTEST: Principal \_\_\_\_\_\_ Principal \_\_\_\_\_\_ Principal signing bond must either be owner, partner, or an officer, if a corporation. (President, Vice-President, Secretary or Treasurer). Principal's title must be shown when bond is signed.

  Surety

  By: \_\_\_\_\_\_\_ Attorney-In-Fact and Resident \_\_\_\_\_\_ Agent for State of Alabama

To be completed by Dothan Utilities

Approved this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_, 20\_\_\_ and Authorized by City Code 102-36.

By: \_\_\_\_\_\_

Utility Collection Manager Finance Director

## SURETY BOND APPLICATION

AGENCY NAME:			AGENCY CONTA	\СТ		
AGENCY PHONE:	AGENCY FA	AGENCY FAX: E-MAIL:				
AGENCY ADDRESS:						
(Street)	TELOOVING TO DEAT		(City)	(State)	(Zip)	
CURRENT OR EXPIRING QUOTE WE AF	RE LOOKING TO BEAT?					
NAME OF PREVIOUS SURETY COMPAN	IY WRITING THE BOND	?				
SECTION I: BOND APPLIED FOR: TYPE OF BOND:		AMOUNT:				
OBLICEE:			EXP.DA			
OBLIGEE ADDRESS: (Street)						
BUSINESS NAME:		(City)	(State)		(Zip)	
BUSINESS PHONE:	BUSINESS FAX:		Client E-mail			
BUSINESS ADDRESS:						
TYPE OF COMPANY CORP LLC	DBA  PARTNERS	(City) HIP  HOW MANY (	(State) DWNERS?		(Zip) 	
DATE BUSINESS ESTABLISHED:	BUSIN	NESS TAX ID:				
HAS ANY COMPANY REFUSED TO ISSUE	YES NO DO	YOU HAVE ANY LII		SEMENTS	YES 🗆 NO 🗖	
BONDS FOR ANY PURPOSE? HAS APPLICANT EVER FAILED IN BUSINI		SAINST YOU?	7 FU FD DANKDURTOV	·0	YES   NO	
TIAG ALT EIGANT EVERT AILED IN BOOM	-00: 123   NO   HA	AS APPLICANT EVE	R FILED BANKRUPTUT	•		
SECTION II: GENERAL INFORMATION	9	SPOUSE NAME				
OWNER'S NAME:SP:	OUSE SS#		ME DHONE:			
RESIDENTIAL ADDRESS:		10	MIL 1 11014L.			
(Street)		(City)	(State)		(Zip)	
ADDITIONAL OWNERS / PARTNERS OWNER'S NAME:	5	SPOUSE NAME				
SS#:SP		<del></del>	ME PHONE:			
RESIDENTIAL ADDRESS:						
(Street)		(City)	(State)		(Zip)	
	ICIALSTATEMENT OF A					
ASSETS CASH IN BANK		LIABILITII NOTES PAYABLE				
CASH IN BANK	\$	NOTES PAYABLE		\$		
STOCKS & BONDS	\$ \$	ACCOUNTS PAYA		\$		
ACCOUNTS RECEIVABLE	\$	<del></del>	E INCOME TAX DUE	\$		
NOTES RECEIVABLE	\$	ALL OTHER TAXES		\$		
INVENTORY	\$	ACCRUALS, PAYROLLS, ETC.		\$		
CASH VALUE OF LIFE INSURANCE	\$	DUE ON EQUIPMENT		\$		
EQUIPMENT	\$	DUE ON REAL ESTATE		\$		
REAL ESTATE	\$	OTHER LIABILITIES				
OTHER ASSETS		OTHER LIABILITIES \$ CAPITAL STOCK (IF A CORPORATION) \$		<del></del>		
O THE TROOP IS	\$	SURPLUS & UND	-	\$		
				<del></del>		
TOTAL ASSETS	s	TOTAL LIABILITIE	:S	\$		
		NET WORTH		s		
NAME OF OWNERS	NAME & TITLE C	E OFFICERS	PERCENTAGE OF OV		ı	
THE OF OTHER	TOTAL GITTLE C	. 31110210				
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Completion of this form constitutes permission for worldwide insurance specialists inc. to obtain consumer information which will be used to determine bonding eligibility.

Worldwide Insurance Specialists, Inc 2424 W. Missouri AVE Phoenix, AZ 85015 Toll Free: (888) 518-8011 Local (602) 749-0702 Fax: (602) 674-8235