

Bond No. _____

BOND ACCOMPANYING LEASE

KNOW ALL MEN BY THESE PRESENTS:

That we _____
as Principal, and _____
a corporation duly organized and existing under and by virtue of the laws of _____
as Surety, are held and firmly bound unto the State of California in the sum of _____

_____ lawful money of the United States, to be paid to the State of California, for which payment, well and truly to be made, we bind ourselves, and each of us, and each of our heirs, executors, administrators, successors and assigns, jointly and severally, by these presents.

THE CONDITIONS OF THE FOREGOING OBLIGATION ARE SUCH THAT

WHEREAS, said Principal as lessee has entered into an agreement designated as PRC _____,
having a beginning date of _____, with the State of California through the State Lands Commission,
and is required by said agreement to give this bond in connection therewith;

NOW THEREFORE, if said Principal shall well and truly keep and faithfully perform all the terms, covenants, conditions, agreements and obligations of said lease, on said Principal's part to be kept, done and performed, at the times and in the manner specified therein and in the provisions of Part 2 of Division 6 of the Public Resources Code, then this obligation shall be null and void, otherwise it shall remain in full force and effect;

PROVIDED, that any modifications of or alterations or changes which may be made in said lease or in the work to be done or in the services to be rendered or in any materials or articles to be furnished pursuant to the said lease, or the giving by said State Lands Commission of the State of California of any extension of time for the performance of said lease terms, or the giving of any other forbearance on the part of either the State Lands Commission of the State of California, or the Principal, to the other, shall not in any way release the Principal or Surety, or either of them, or their respective heirs, executors, administrators, successors or assigns, from any liability arising hereunder and notice to the Surety of any such modifications, alterations, changes, extensions or forbearance (other than written modifications of said lease, the execution of which is duly authorized by order of said State Lands Commission for the State of California) is hereby waived.

This bond is continuous and shall be effective on _____. The Surety shall have the right to withdraw as Surety from this bond, except as to any liability already incurred or accrued, and may do so upon giving the said Principal and State Lands Commission of the State of California sixty (60) days written notice to that effect. Such notice to the Principal may be given by delivery or by deposit of the notice in registered or certified mail with all changes prepaid, addressed to the Principal at his last address on the records of the Commission. At the end of said sixty (60) days period of notice the liability of the Surety under this bond, except as to any liabilities already incurred or accrued, shall cease, and said bond shall thereupon terminate and be no more force or effect, except as to any liabilities already incurred or accrued thereunder.

IN WITNESS WHEREOF, the above Principal and Surety have executed or caused to be executed this instrument under their respective hands and all, with all the formalities required by law this _____ day of _____, _____.

PRINCIPAL: _____

By: _____

SURETY: _____

By: _____

Surety Bond Application

AGENCY NAME: _____ AGENCY CONTACT: _____
AGENCY PHONE: _____ AGENCY FAX: _____ AGENCY EMAIL: _____
AGENCY ADDRESS: _____ City: _____ State: _____ Zip: _____

CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT? _____

NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND? _____

SECTION I: BOND APPLIED FOR

Type of Bond: _____ Effective Date: _____ Expiration Date: _____

Type of Company **CORP** ☐ **LLC** ☐ **DBA** ☐ **PARTNERSHIP** ☐ Bond Amount: _____

(Obligee): _____

Obligee Address _____

SECTION II: GENERAL INFORMATION

Applicant's Name: _____ Spouse Name: _____

SS#: _____ Spouse SS#: _____ Home Phone: () _____

Residence Address: _____ City: _____ State: _____ Zip: _____

Business Name: _____

Business Phone: () _____ Business Fax: () _____ E-mail: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Date Business BEGAN under present Individual or Firm Name: _____ BUSINESS TAX ID: _____

HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE? YES ☐ NO ☐ DO YOU HAVE ANY LIENS, CLAIMS OR JUDGMENTS AGAINST YOU? YES ☐ NO ☐

HAS APPLICANT EVER FAILED IN BUSINESS? YES ☐ NO ☐ HAS APPLICANT EVER FILED BANKRUPTCY? YES ☐ NO ☐

IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER

SECTION III: ADDITIONAL OWNERS OR PARTNERS AS REQUIRED

NAME: _____ SPOUSE NAME: _____

SS#: _____ SPOUSE SS#: _____ PHONE: _____

HOME ADDRESS: _____ City: _____ State: _____ Zip: _____

PERSONAL FINANCIALS (IF MORE THAN ONE OWNER, EACH HAS TO FILL OUT THIS APPLICATION)

STATEMENT OF ASSETS AND LIABILITIES AS OF

ASSETS		LIABILITIES	
CASH IN BANK		NOTES PAYABLE TO BANKS	
CASH ON HAND		NOTES TO OTHERS (excl. of equipment)	
STOCKS AND BONDS		ACCOUNTS PAYABLE	
ACCOUNTS RECEIVABLE		FEDERAL & STATE INCOME TAX DUE	
NOTES RECEIVABLE		ALL OTHER TAXES	
INVENTORY		ACCRUALS, PAYROLLS, ETC.	
CASH VALUE LIFE INSURANCE			
EQUIPMENT		DUE ON EQUIPMENT	
REAL ESTATE		DUE ON REAL ESTATE	
OTHER ASSETS		OTHER LIABILITIES	
		CAPITAL STOCK (if a corporation)	
		SURPLUS AND UNDIVIDED PROFITS	
TOTAL ASSETS		TOTAL LIABILITIES	
		NET WORTH	
Name of Owners		Name and Title of Officers	% OWNERSHIP IN COMPANY

COMPLETION OF THIS FORM CONSTITUTES PERMISSION FOR WORLDWIDE INSURANCE SPECIALISTS INC. TO OBTAIN CONSUMER INFORMATION WHICH WILL BE USED TO DETERMINE BONDING ELIGIBILITY. THIS INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE
NO PREMIUM FINANCING WILL BE ACCEPTED AS PREMIUM IS EARNED IN FULL.

Worldwide Insurance Specialists, Inc
2424 W. Missouri AVE
Phoenix, AZ 85015

Toll Free: (888) 518-8011
Local (602) 749-0702
Fax: (602) 674-8235

E-Mail WWIS@WWISINC.COM