

**CAR WASH BOND**  
CALIFORNIA LABOR CODE SECTION 2055(b)

KNOW ALL PERSONS BY THESE PRESENTS:

BOND NO. \_\_\_\_\_  
(SURETY USE ONLY)

That we \_\_\_\_\_  
(Full Name and Address of Legal Entity that is the Employer)

doing business as \_\_\_\_\_

an employer engaged in the business of car washing and polishing, as Principal, and \_\_\_\_\_  
(Full Name and Address of Surety)

\_\_\_\_\_, a surety company qualified and admitted to do business in the State of California, as Surety, are held and firmly bound unto the People of the State of California, in the penal sum of \_\_\_\_\_ dollars ( \_\_\_\_\_ ) lawful money of the United States of America, to be paid to the People of the State of California, for which payment we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

The provisions of Labor Code Section 2055(b) require that the Principal file with the Labor Commissioner a bond in the penal sum of \_\_\_\_\_. The condition of this obligation is that set forth in Section 2055(b)(1) of the Labor Code of the State of California, to wit: If the above bounden Principal pays to employees when due in accordance with the law such portion of earned wages, interest on wages, and fringe benefits as are due to said employees, and such damages as are due an employee damaged by a violation of California Labor Code Section(s) 351 and/or 353, then this obligation is to be null and void; otherwise, it it to remain in full force and effect.

Pursuant to Code of Civil Procedure Section 996.360(a) and (b), this bond shall remain in full force and effect for all liabilities incurred before, and for acts, omissions, or causes existing or which arose before, the cancellation or withdrawal. This bond shall be deemed continuous in form and shall remain in full force and effect throughout all succeeding registration periods, unless terminated or cancelled in the manner hereinafter provided.

The aggregate liability of the Surety hereunder on all claims whatsoever shall not exceed the penal sum of this bond in any event.

The bond is executed by the Surety to comply with Section 2055(b) of the Labor Code and chapter 2, title 14, part 2 of the Code of Civil Procedure and said bond shall be subject to all of the terms and provisions thereof.

The bond may be cancelled by the Surety in accordance with article 13, (commencing with section 996.310) of chapter 2, title 14, part 2, of the Code of Civil Procedure.

The surety, its successors and assigns, agree they are jointly and severally liable on the obligations of the bond, the provisions of chapter 2 (commencing with section 995.010), title 14, part 2, of the Code of Civil Procedure, and Section 2055 of the Labor Code.

The Principal and Surety may be served with notices, papers and other documents under chapter 2 (commencing with section 995.010), title 14, part 2, of the Code of Civil Procedure, at the addresses given above.

The effective date of this bond is \_\_\_\_\_

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct and that I have executed the foregoing bond under an

unrevoked power of attorney. Executed at \_\_\_\_\_

IN WITNESS WHEREOF, the said Principal and Surety have hereunto set their hands and seals this \_\_\_\_\_ day of \_\_\_\_\_

(If a corporation, two officers sign below)

(If an individual, sign below. If a partnership, all partners sign below. If a LLC, managing member sign below)

A CORPORATION \_\_\_\_\_  
By: \_\_\_\_\_  
PRINCIPAL

\_\_\_\_\_ PRINCIPAL

By: \_\_\_\_\_  
(TITLE OF OFFICIAL)

\_\_\_\_\_

By: \_\_\_\_\_  
(TITLE OF OFFICIAL)

\_\_\_\_\_

SURETY

(CORPORATE SEAL)

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

Attach certificate of acknowledgement of surety before a notary public.

(TITLE OF OFFICIAL)

Bond forms change; this is for educational purposes only.  
NOTE: This bond is to be duly executed and filed with the State Labor Commissioner.

Acknowledgment of Principal  
Acknowledgment of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

County of \_\_\_\_\_ ss

On \_\_\_\_\_ before me, \_\_\_\_\_

(here insert name and title of the officer), personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)

Acknowledgment of Principal  
Acknowledgment of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

County of \_\_\_\_\_ ss

On \_\_\_\_\_ before me, \_\_\_\_\_

(here insert name and title of the officer), personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)

Acknowledgment of Principal  
Acknowledgment of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

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On \_\_\_\_\_ before me, \_\_\_\_\_

(here insert name and title of the officer), personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)

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# 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	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES</b>	
		<b>NET WORTH</b>	
<b>Name of Owners</b>	<b>Name and Title of Officers</b>	<b>% OWNERSHIP IN COMPANY</b>	

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

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**Local (602) 749-0702**  
**Fax: (602) 674-8235**

**E-Mail WWIS@WWISINC.COM**