

STATE OF CALIFORNIA
DEPARTMENT OF CORPORATIONS

BOND OF ESCROW LICENSEE
(Financial Code Section 17202)

Bond No. _____

KNOW ALL MEN BY THESE PRESENTS:

That we _____,
as Principal, whose address for service is

(Street Address, City, State and ZIP Code)

and _____ a corporation, created, organized and
existing under and by virtue of the laws of the State of _____
and an admitted Surety insurer authorized to transact a general Surety business in
the State of California, as Surety whose address for service
is _____
(Street Address, City, State and ZIP Code)

are held and firmly bound unto the Commissioner of Corporations of the State of
California, as Obligee, for the use thereof and for the use of any person or persons
who may have a cause of action against the Principal under the provisions of the
Escrow Law and all acts amendatory thereof and supplementary thereto now and
hereafter enacted, in the total aggregate penal sum of _____
(_____), (see Financial Code Section 17202) lawful money of the United States
of America, to be paid to the Commissioner of Corporations of the State of
California, or to any person or persons, for the use and benefit aforesaid, for
which payment well and truly to be made, we bind ourselves, our heirs, executors,
administrators, successors and assigns, jointly and severally firmly by these
presents.

The condition of the above obligation is such that:

WHEREAS, the above-named Principal has made application to the Commissioner of
Corporations of the State of California for a license to engage in business under
and pursuant to the provisions of the Escrow Law, and is required under the
provisions of the Escrow Law to furnish a bond in the sum above named, conditioned
as herein set forth:

NOW, THEREFORE, The Principal, and any and all agents and employees
representing the Principal, shall faithfully conform to and abide by the provisions
of the Escrow Law and all acts amendatory thereof and supplementary thereto now and
hereafter enacted, and of all rules and regulations lawfully made by the
Commissioner of Corporations of the State of California under the Escrow Law and
shall honestly and faithfully apply all funds received and shall faithfully and
honestly perform all obligations and undertakings under the Escrow Law, and shall
pay to the Commissioner of Corporations of the State of California and to any person
or persons, for the use and benefit aforesaid, any and all moneys which become due
or owing to the State or to any such person or persons from the Principal under and
by virtue of the provisions of the Escrow Law, including the costs in any
conservatorship, or liquidation, whether such costs are incurred by the Commissioner
of Corporations of the State of California or by a receiver.

This bond is subject to the following provisions:

1. That any person who sustains an injury covered by this
bond may, in addition to any other remedy that he or she may have, bring an action
in his or her own name upon this bond for the recovery of any damages sustained by

him or her; provided, however, that no such action may be brought after the expiration of two years from and after the act or default complained of.

2. That the total aggregate liability of the Surety or Sureties herein shall be limited to the payment of _____ (_____) (insert amount of the bond).

3. This bond may be canceled by the Surety in accordance with the provisions of Sections 996.320 and 996.330 of the Code of Civil Procedure of the State of California.

4. That, in the event either the Principal and/or the Surety under this bond are served with notice of any action commenced against the Principal or the Surety under the bond, the Principal and Surety as each is served with notice of action shall respectively and immediately give written notice of the filing of such action to the Commissioner of Corporations of the State of California, at the Los Angeles office of the Department of Corporations.

5. That, in the event the Surety under this bond makes full or partial payment on this bond the Surety shall immediately give written notice of such full or partial payment to the Commissioner of Corporations of the State of California, at the Los Angeles office of the Department of Corporations.

6. That the effective date of this bond shall be _____.

Signature of Principal

Typed or Printed Name of Principal

Executed at (City and State)

I certify (or declare) under penalty of perjury that I have executed the foregoing bond under an unrevoked power of Attorney.

Executed in _____ on _____
(City and State) (Date)

under the laws of the State of California.

Signature of Attorney-in-Fact
for Surety

Printed or typed name of
Attorney-in-Fact for Surety

ALL OF THE ABOVE SIGNATURES MUST BE NOTARIZED

ACKNOWLEDGEMENTS

PRINCIPAL

STATE OF _____

County of _____ ss

On _____ before me, _____

personally appeared _____ who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

(Seal)

SURETY

STATE OF _____

County of _____ ss

On _____ before me, _____

personally appeared _____ who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

(Seal)

INTEGRITY SURETY BOND APPLICATION

AGENCY NAME: _____ AGENCY CONTACT _____
AGENCY PHONE: _____ AGENCY FAX: _____ E-MAIL: _____
AGENCY ADDRESS: _____
(Street) (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: _____ EFF.DATE: _____ EXP.DATE: _____
TYPE OF COMPANY CORP ☐ LLC ☐ DBA ☐ PARTNERSHIP ☐ AMOUNT: _____
OBLIGEE: _____
OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)

SECTION II: GENERAL INFORMATION

APPLICANT'S NAME: _____ SPOUSE NAME _____
SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)
BUSINESS NAME: _____
BUSINESS PHONE: _____ BUSINESS FAX: _____ Client E-mail _____
BUSINESS ADDRESS: _____
(Street) (City) (State) (Zip)
DATE BUSINESS BEGAN UNDER CURRENT NAME: _____ BUSINESS TAX ID: _____
HAS ANY COMPANY REFUSED TO ISSUE YES ☐ NO ☐ DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS YES ☐ NO ☐
BONDS FOR ANY PURPOSE? AGAINST YOU?
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 / PARTNERS

APPLICANT'S NAME: _____ SPOUSE NAME _____
SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

STATEMENT OF ASSETS & LIABILITIES AS OF _____

ASSETS		LIABILITIES	
CASH IN BANK	\$	NOTES PAYABLE TO BANKS	\$
CASH ON HAND	\$	NOTES PAYABLE TO OTHERS	\$
STOCKS & BONDS	\$	ACCOUNTS PAYABLE	\$
ACCOUNTS RECEIVABLE	\$	FEDERAL & STATE 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	\$	CAPITAL STOCK (IF A CORPORATION)	\$
		SURPLUS & UNDIVIDED PROFITS	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
		NET WORTH	\$
NAME OF OWNERS	NAME & TITLE OF OFFICERS		PERCENTAGE OF OWNERSHIP

Completion of this form constitutes permission 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.

Integrity Bonds Inc

E-Mail info@integritybonds.com

Toll Free: (866) 420-2613

Local (480) 626-8916

Fax: (602) 674-8235