Bond No. Premium Amount $

California Non-Dominant Interexchange Carrier Performance Bond

Bond Number_____

KNOW ALL BY THESE PRESENTS THAT WE, _____,
as Principal, and _____,
a corporation organized and existing under the laws of the State of _____ and authorized to transact surety business in the State of California, as Surety, are held and firmly bound unto the California Public Utilities Commission (CPUC), as Obligee, in the sum of twenty-five thousand dollars ($25,000.00), good and lawful money of the United States of America, for the payment of which well and truly to be made we bind ourselves, our heirs, administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS the Principal is licensed by the Obligee as a Non-Dominant Interexchange Carrier (NDIEC) under the provisions of the Public Utilities Code and applicable Public Utilities Commission decisions; and

WHEREAS effective September 3, 2010, the CPUC established new requirements in D.10-09-017 for all NDIEC registration license holders; and

WHEREAS, one of such new requirements is that every NDIEC registration license holder obtain a continuous performance bond in the amount of $25,000 or 10% of the Principal's intrastate revenues as reported to the CPUC during the preceding calendar year, whichever is greater; and WHEREAS, the Principal is required to post security in accordance with the provisions of D.10-09-017 of the CPUC and applicable CPUC decisions for the full and prompt payment of any monetary sanction (i.e. fines, penalty, or restitution) imposed against the Principal, its representatives, successors or assigns, in any CPUC enforcement proceeding under the CPUC and D.10-09-017, for which obligation we bind ourselves, our representatives, successors and assigns, each jointly and severally, firmly and unequivocally, by these presents.

Whereas the Principal stipulates that as of the effective date of this bond, the sum of _____ ($) is the greater of the aforesaid sums.

NOW, THEREFORE, this bond shall become effective on_____, and shall be continuous; provided, however, that each annual renewal period or portion thereof shall constitute a new bond term.

Regardless of the number of years this bond may remain in force, the liability of the Surety shall not be cumulative, and the aggregate liability for the Surety for any and all claims, suits or actions under this bond shall not exceed twenty-five thousand dollars ($25,000.00).

The Surety may cancel this bond by providing thirty (30) days written notice of same to the Public Utilities Commission of the State of California, and the Principal, via Certified Mail, it being understood that the Surety shall not be relieved of liability that may have accrued pursuant to this bond prior to the date of cancellation.

SIGNED, SEALED AND DATED THIS _____.

_____ _____

_____ _____

Principal Attorney-In-Fact

SAMPLE WISINC.COM

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
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Phoenix, AZ 85015

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E-Mail WWIS@WWISINC.COM

SAMPLE WWISINC.COM