## SURETY BOND (PRLS)

RE 270 (Rev. 12/00)

Read instructions on reverse side before completing	this form.	PREMIUM	BOND NUMBER
KNOW ALL MEN BY THESE PRESENTS:			
That we,			
	not include DBA)		
			as PRINCIPAL
(Add	dress)		
and			
a corporation organized under the laws of the State of of surety in the State of California as SURETY are held and fir sum of Ten Thousand dollars (\$10,000) for which paymen administrators, successors and assigns, jointly and severally,  PRINCIPAL has applied to the Department of Real Estat Listing Service, or for the renewal of said license and is required to have on file with the Department of Real Estate, a bond in executed and tendered in accordance with Section 10167.7.  The condition of this obligation is that if PRINCIPAL sates as the result of any action undertaken pursuant to subdivision void. Otherwise it shall remain in full force and effect.  For value received, SURETY does hereby waive any rigunder creditor of PRINCIPAL pursue any other remedies.  This bond is continuous in form and shall remain in full Prepaid Rental Service License issued to PRINCIPAL and for cancelled by SURETY as provided by law.	tisfies any and all a (f) of Section 10 the granted to SUR of the Tributh of the granted to SUR of the collection of the force and effect and force and effect are sent to the section of the collection of the co	e State of Cal to be made, lifornia for a 167.7 of the ,000 for each final judgment 167.10, then ETY by Sect enforce this contained in the state and shall run c	license to act as a Prepaid Renta Business and Professions Code licensed location. This bond is not sentered against PRINCIPAI this obligation shall be null and the control of the California Civil obligation or that the underlying int.
PRINCIPAL and SURETY have executed this agreeme	ent this	day of	20
The vertile and series is made executed this defection			
(Principal)		(Surety)	
By:	By:		
(Signature)		(Signature)	)
PRODUCER	NFORMATION		
AGENT NAME	COMPANY NAME		
COMPANY ADDRESS			TELEPHONE NUMBER

## Instructions

❖ Complete and return *original* Surety Bond; *do not duplicate this form*.

The bond must be written by an insurance company authorized to write surety bonds. If the endorsement is for an individual, the Principal on the bond must be the name of the individual. If the endorsement is for a licensed corporation, the Principal on the bond must be the name of the corporation and the individual signing on behalf of the corporation must be an officer of that corporation.

- Bond package includes the following:
  - *original* Surety Bond (PRLS) [RE 270]
  - power of attorney statement
  - notarized surety acknowledgment
- ❖ Failure to submit these documents with the completed application and fee will delay processing.
- **♦ Mail To:** Department of Real Estate

P.O. Box 187000

Sacramento, CA 95818-7000

## **Surety Bond Application**

AGENCY NAME:	AGENCY CONTACT:						
	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 S	S#:	Ho	me Phone: ( )				
Residence Address:	City:	St	ate:	Zip:			
Business Name:							
Business Phone: ()	Business Fax: (	)	E-mail:				
Business Address:	City:	St	ate:	Zip:			
Date Business BEGAN under present Individual or Firm Name: BUSINESS TAX ID:							
HAS ANY COMPANY REFUSED TO ISSUE BONDS DO YOU HAVE ANY LIENS, CLAIMS OR JUDGMENTS							
FOR ANY PURPOSE?  HAS APPLICANT EVER FAILED IN BUSINE			VED EILED BANKDLII	YES NO			
				PICT! TES   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#:	SPOUSES	SS#:	PHON	E:			
HOME ADDRESS:	City:	5	state:	Zip:			
PERSONAL FINANCIALS (IF MORE THAN ONE OWNER, EACH HAS TO FILL OUT THIS APPLICATION)							
STATEMENT OF ASSETS AND LIABILITIES AS OF							
ASSETS		NOTEC DAVABLE TO	LIABILITIES	†			
CASH IN BANK CASH ON HAND		NOTES PAYABLE TO BANKS 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 MODETO							
TOTAL ASSETS		TOTAL LIABILITIES NET WORTH					
Name of Owners	Name and 1	itle of Officers % OWNERSHIP IN COMPANY					
A STATE OF THE STA							

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