



DISTRICT OF COLUMBIA
Department of Insurance, Securities and Banking
Banking Bureau
 810 First Street, NE, Suite #701
 Washington, D.C. 20002

Phone: (202) 727-8000 Fax: (202) 535-1197 Email: BankingBureau@DC.gov Internet: www.disb.dc.gov

SURETY BOND

No. _____

[Applicable license **must** be marked with an X]

- Mortgage Lender/Broker Money Transmitter Check Cashier Consumer Sales Finance Consumer Money Lender

Know all men by these presents, that the undersigned as **PRINCIPAL**, with primary place of doing business at _____ and

Additional (Branch) offices located at:

1. _____
2. _____
3. _____
4. _____

and _____, as **SURETY**,

are held and firmly bound unto the District of Columbia for the use and benefit of the District and of any creditor or claimant against the principal or his agents in the principal sum of _____ Dollars \$ _____), for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns jointly and severally be these presents.

WHEREAS, the above named principal has applied to the District of Columbia Department of Insurance, Securities and Banking for the license indicated above as provided by applicable provisions of the DC Official Code and Municipal Regulations; and is required to file a surety bond to obtain such license in the District of Columbia.

NOW, THEREFORE, the conditions, characteristics, and requirements of the foregoing obligation are defined and set forth in the DC Official Code and DC Municipal Regulations duly promulgated thereunder, shall apply as follows:

[Applicable DC Law **must** be marked with an X]

- District of Columbia Money Transmitter Law, D.C Law 13-140; D.C. Official Code 26-1001 et seq.
 District of Columbia Consumer Sales Finance Law, D.C Law Official Code 40-1101 et seq.
 District of Columbia Money Lender Law, D.C. Law Official Code 26-701 et seq.
 District of Columbia "Check Cashers Act of 1998".
 District of Columbia Mortgage Lender and/or Broker Act of 1996 DC Law 11-155; DC Official Code 26 1100 et seq

This obligation is issued under and is governed by the applicable District of Columbia laws and all regulations indicated above; duly promulgated thereunder for the license the principal is seeking, and the obligations of the surety shall be those therein set forth.

This bond becomes effective as of _____, 20____ in support of a license issued to the Principal by the District of Columbia Department of Insurance, Securities and Banking and shall remain in full force and effect through license period ending _____, 20____. An appropriate renewal certificate in support of license renewal may continue this obligation for subsequent years as long as the required bond amount is available for each license period covered by the bond and any renewal certificate, on a cumulative basis for the benefit of any person who has been damaged by the principal's violation of any law or regulation governing the activities covered by the license. In accordance with prescribed laws, this bond may not be canceled by either the licensee or the corporate surety except upon notice to the Department of Insurance, Securities and Banking by registered or certified mail with return receipt requested, the cancellation to be effective not less than 30 days after receipt by the Department of Insurance, Securities and Banking of such notice and only with respect to any breach of condition occurring after the effective date of such cancellation.

WITNESS WHEREOF, the parties hereto have hereunto set our hands and affixed our seals this _____ day of _____, 20_____.

Principal

By: _____

Title: _____

Surety

By: _____

Title: _____

Bond forms change; this is for educational purposes only.

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 BONDS FOR ANY PURPOSE? YES NO DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS 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 / 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

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