

Instructions to complete the Surety Bond form:

1. Type social security or tax identification number.
2. If incorporated, apply impression of corporate seal.
Note: The corporate seal must agree with the corporation's name on the Surety Bond. If there is no corporate seal, please indicate and write "NONE" in the designated space.
3. Type date the Surety Bond is to be signed on the Power of Attorney (usually the last date on the form).
Note: This date must agree with the Notary Certificate date for the Surety signature.
4. Have Corporate Officer sign the Surety Bond and enter title of signatory.
5. Notarize the Corporate Officer's signature.
Note: Do not alter name or date of Notary Certificate.
6. Apply impression of notary seal.
Note: The seal must contain the name of Notary Public.
7. Submit Surety Bond to insurance company for completion.
The Surety Company selected must be rated C (per Weiss Ratings, Inc.) or higher for FPL's acceptance. In addition, this rating is monitored to ensure that this minimum rating is maintained throughout the life of your bond.
8. Upon receipt of Surety Bond and Power of Attorney from Insurance/Surety Company, retain a copy and return original to: **FPL, Attention: RRD\GO Deposit Administration, 9250 W. Flagler Street, Miami, FL 33174.**

Your cash deposit will be refunded.

Upon receipt of the completed Surety Bond, all cash deposits will be applied to your electric bills.

District _____
Bond # _____

Master Account No.: _____
Service Address: _____
Various Service Addresses

Principal's Social Security No. or Tax I.D. _____

SURETY BOND

KNOW ALL PERSONS BY THESE PRESENTS:

THAT WE, _____ as Principal at (mailing address) _____ and _____, a surety company at (mailing address) _____ authorized to do business in the State of Florida, as Surety are held and firmly bound to Florida Power & Light Company, a corporation organized and existing under the laws of the State of Florida, its successors and assigns, in the amount of _____ dollars (\$ _____), lawful money of the United States of America for the payment of which the Principal and Surety, their heirs, executors, administrators, successors and assigns are hereby jointly and severally bound.

WHEREAS, pursuant to its authorized General Rules and Regulations for Electric Service, Florida Power & Light Company requires the Principal to establish credit for prompt payment of its monthly utility bills, and Principal and Florida Power & Light Company agree that Principal may do so by furnishing this surety bond for prompt payment of the monthly utility bills to be rendered by Florida Power & Light Company;

NOW THEREFORE, the condition of this obligation is such that if the Principal shall promptly pay all amounts which may be due by Principal to Florida Power & Light Company for utility services in the Principal's name at any or all premises, then this obligation shall be null and void; otherwise it shall remain in full force and effect.

PROVIDED FURTHER, that Principal and Surety jointly and severally agree that if at any time Principal's payment, or any part thereof, of Principal's obligations to Florida Power & Light Company is rescinded or must otherwise be restored or returned for any reason whatsoever (Including, but not limited to, insolvency, bankruptcy or reorganization), then the Surety obligation shall, to the extent of the payment rescinded or returned, be deemed to have continued in existence, notwithstanding such previous payment, and the Surety obligation shall continue to be effective or be reinstated, as the case may be, as to such payment, all as though such previous payment had never been made;

PROVIDED FURTHER, that regardless of the number of years this bond shall continue or be continued in force and of the number of premiums which shall be payable or paid, the Surety shall not be liable there under for a larger amount, in the aggregate, than the amount of this bond, unless suit must be brought for enforcement of the within obligations in which case the Surety will also be liable for all costs in connection therewith and reasonable attorneys' fees, including costs of and fees for appeals; and

PROVIDED FURTHER, that should the Surety so elect, this bond may be canceled by the Surety as to subsequent liability by giving thirty (30) days' notice in writing by certified mail-return receipt requested to **Florida Power & Light Company RRD/GO 9250 W Flagler St Miami, FL 33174**. **The notice of cancellation shall not be effective unless it includes the Principal's name and "Master Account Number: _____" written thereon.**

Signed, sealed and dated this _____ day of _____, _____.

Principal _____

By _____

Title _____

(Corporate officer, partner or general partner of limited partnership)

CORPORATE SEAL (Principal)

NOTARY SEAL (Principal)

NOTARY CERTIFICATE-PRINCIPAL SIGNATURE

STATE OF _____

COUNTY OF _____

SWORN TO and SUBSCRIBED before me this _____ day of _____, _____.

Notary Public: _____

My Commission Expires: _____

Surety _____

CORPORATE SEAL (Surety)

NOTARY SEAL (Surety)

By _____
(Designated in attached Power of Attorney. If not Florida resident, countersigned below)

NOTARY CERTIFICATE-SURETY SIGNATURE

STATE OF _____

COUNTY OF _____

SWORN TO and SUBSCRIBED before me this _____ day of _____, _____.

My Commission Expires: _____

Notary Public: _____

Agent)

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.

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