GEORGIA REAL ESTATE APPRAISERS BOARD SURETY BOND

1000 International Tower 229 Peachtree Street NE Atlanta, Georgia 30303-1609

SURETY BOND

Bond #	Premium: \$	
KNOW ALL PERSO	ONS BY THESE PRESENTS that we,	
Legal Entity as Principal, and	as Surety of (Main Address)	are held
	(Maii Address)	
lawful money of the	the people of the State of Georgia in the penal sum of Twenty e United States of America to be paid to the people of the State our heirs, executors, administrators, successors and assigns join	te of Georgia; for which payment
favor of the State v damages in the amount	uis obligation is set forth in O.C.G.A. §43-39A-11. Such sure with a surety bond company authorized to do business in tount of such bond to any appraiser(s) aggrieved by any act of toution of Title 43, Chapter 39A of the Official Code Of Georgi Appraisers Board.	this state and conditioned to pay the principal named in such bond,
This bond shall be or registration periods to	deemed continuous in form and shall remain in full force and unless terminated or cancelled in the manner hereinafter provide	l effect throughout all succeeding led.
The aggregate liabili	ity of the surety claims against this bond shall, in no event, exc	eed the penal sum of this bond.
bond (except to liabito the surety, and th	a, acting through the Georgia Real Estate Appraisers Board rility there under already incurred or accrued) at any time by a nereupon this bond shall terminate and be of no more force of accrued as to which is shall remain in force and effect.	written notice of such termination
IN WITNESS WHE	EREOF, the said Principal and Surety have hereunto set their ha	ands and seals this
day of (If an individual, sig	, 20 m below; if partnership, all partners must sign.)	
Principal Surety	Pro	
	By:	

Title

Surety Bond Application

AGENCY NAME:	AGENCY CONTACT:					
AGENCY PHONE:AGE			CY 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	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? YES NO AGAINST YOU? YES NO 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 OR PARTNERS AS REQUIRED						
NAME:SPOUSE NAME:						
SS#:	SPOUSE S	SS#:	PHON	E:		
HOME ADDRESS:	City:		state:			
PERSONAL FINANCIALS (IF MORE THAN ONE OWNER, EACH HAS TO FILL OUT THIS APPLICATION)						
STATEMENT OF ASSETS AND LIABILITIES AS OF						
CASH IN BANK		NOTES PAYABLE TO	LIABILITIES			
CASH ON HAND		NOTES TO OTHERS				
STOCKS AND BONDS		ACCOUNTS PAYABI				
ACCOUNTS RECEIVABLE		FEDERAL & STATE	NCOME TAX DUE			
NOTES RECEIVABLE		ALL OTHER TAXES				
INVENTORY		ACCRUALS, PAYRO	LLS, ETC.			
CASH VALUE LIFE INSURANCE DUE ON EQUIPMENT						
	REAL ESTATE DUE ON REAL ESTATE					
OTHER ASSETS		OTHER LIABILITIES				
		CAPITAL STOCK (if a corporation)				
SURPLUS AND UNDIVIDED PROFITS						
TOTAL LIABILITIES						
TOTAL ASSETS		NET WORTH				
Name of Owners	Name and 1	itle of Officers	% OWNERSH	IIP 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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