STATE OF	
COUNTY OF	
SECURITY DEPOSIT SUF	RETY BOND
Surety bond given by	
as principal of	City of
as principal of, County of	, State of,
and	as surety, a
corporation duly incorporated under the laws of the	State of,
and duly licensed to transact a surety business in the	State of;
to Blue Ridge Mountain Electric Membership Corpo	ormion, of P.O. Box 9, Young Harris,
Georgia 30582, as obligee.	
. RECITALS	
Principal and surety are bound	Dellar
(\$), for the payment of which principal	and sweety jointly and severally bind
themselves, their successors, assigns, and legal repre	esentatives.
2. Principal and obligee have	entered into a contract for electric.
service, herein called the original contract, which we	as executed on
20, in the City of Young Harris, County of I	rowns, State of Georgia, pursuant to
application by the principal accepted by the obli	igee, for obligee to provide electric

service to the principal, both parties agreeing that said service shall be in accordance with the terms of the application, any written contract, and the Articles of Incorporation, by-

laws and policies of obligee, as the same now exists, or may hereafter be amended.

SECTION ONE DURATION

This obligation shall run continuously and shall remain in full force and effect until and unless the bond is terminated and cancelled as provided herein or as otherwise provided by law.

SECTION TWO LIMITATION

This bond covers the contract for electric service to be received by principal from obliges.

SECTION THREE CONDITION OF OBLIGATION

If principal fully performs its obligation under the terms and provisions of its agreement to pay for electric service provided principal by obligee, this obligation shall be void; otherwise the obligation shall remain in full force and effect, subject only to the following provisions of this bond.

SECTION FOUR

NOTICE

	No liability sha	dl attach to surety h	ereunder unless upon dis	covery of any
fact or cir	cumstance indicati	ng a possible claim	hereunder, immediate	written notice
thereof con	ntaining all details t	hen known is given t	o surety at its principal of	fice at
		, City of		•
County of		State of		<u> </u>

SECTION FIVE

TERMINATION

= Swaty=way= 4erminate=its= obligation= hersunder=only=with=the=written=
consent_of_abliges ac long as-principal-is receiving electric-service from obliges; an endir

demination; if consented to; shall not affect this agreement in respect to any obligation which may have atisen prior to the termination of this surety-band.

This bond may be cancelled by the Surety as to future liability upon giving thirty (30) days written notice to Obligee

SECTION SIX

EXTENT OF LIABILITY

The maximum amount of the liability of surety by virtue of this obligation shall be no more than _______Dollars (\$______), together with the interest due thereon and other charges imposed pursuant to the policies. of obligee.

SECTION SEVEN

VENUE OF ACTION ON BOND

If any action or proceeding is initiated in connection with this bond and any and all obligations arising hereunder, the venue thereof shall be the County of Towns, State of Georgia.

SECTION EIGHT

MODIFICATION OF ORIGINAL CONTRACT

Any deviation from additions to, or modifications in the obligations of the original comract may be made without the consent or knowledge of surety and without in any way releasing surety from liability under this bond.

SECTION NINE

SEVERABILITY

If any one or more of the provisions of this bond are determined to be illegal or unanforceable by a court of competent jurisdiction all other provisions shall remain effective.

Bond forms change; this is for educational purposes only.

SECTION TEN

BINDING EFFECT OF AGREEMENT

This bond shall be binding on surety and its successors, assigns, and legal representatives. In witness whereof, principal and surety have executed this bond at _____ ___ day of __ Principal ATTEST: (Principal) Secretary (SEAL) By: Title (Witness as to Principal) (Address) (Surety) ATTEST: Witness to Surety Attorney-in-Fact

(Attach hereto copy of power of attorney form of attorney-in-fact)

(Address)

(Address)

Surety Bond Application

AGENCY NAME:	AGENCY CONTACT:							
	_AGENCY FAX:AGENCY EMAIL:							
AGENCY ADDRESS:			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:	Effecti	ve Date:	Expiration Date	:				
Type of Company CORP LLC DBA	PARTNERSHIP	☐ Bond Amo	unt:					
(Obligee):								
Obligee Address								
SECTION II: GENERAL INFORMATION								
Applicant's Name:								
SS#:Spouse SS	\$#:	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 Individu	ual 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 BUSINES			VED EILED BANKDLI	YES NO				
		ON A SEPERATE SHE		PICT! TES NO				
SECTION III: ADDITIONAL OWNERS								
NAME:	SPOUSE N	IAME:	•					
SS#:	SPOUSE S	SS#:	PHON	E:				
HOME ADDRESS:	City:		state:					
PERSONAL FINANCIALS (IF MORE			OUT THIS APPLICA	ATION)				
ST		TS AND LIABILITIES	AS OF	<u> </u>				
ASSETS CASH IN DANK		NOTES PAYABLE TO	LIABILITIES	<u> </u>				
CASH IN BANK CASH ON HAND		NOTES TO OTHERS						
STOCKS AND BONDS		ACCOUNTS PAYABI						
ACCOUNTS RECEIVABLE		FEDERAL & STATE INCOME TAX DUE						
NOTES RECEIVABLE		ALL OTHER TAXES						
INVENTORY		ACCRUALS, PAYROLLS, ETC.						
CASH VALUE LIFE INSURANCE		DUE ON FOURDMENT						
EQUIPMENT REAL ESTATE		DUE ON EQUIPMENT DUE ON REAL ESTATE						
OTHER ASSETS		OTHER LIABILITIES						
		CAPITAL STOCK (if a corporation)						
		SURPLUS AND UNDIVIDED PROFITS						
TOTAL ASSETS		TOTAL LIABILITIES						
Name of Owners	Name and T	NET WORTH itle of Officers	% OWNERS	IIP IN COMPANY				
Trains and This of Smoots // Office in the Community								

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