

Contractors Bond

State of Louisiana
Parish of Calcasieu

Bond No. _____
(Principals Address & Phone #)

KNOW ALL MEN BY THESE PRESENTS: THAT WE, _____
as principal and _____ who as surety, are qualified and duly authorized to do
business in La., are held and firmly bound unto the City of Lake Charles, Louisiana, to strictly comply with all provisions of the standard
Building Code, Plumbing Code, Mechanical Code, and Electrical Code, and Ordinances of the City of Lake Charles, as adopted in
Articles II, III, IV, and VII of Chapter 6 of the Lake Charles Code of Ordinances, in the penal sum of five thousand (\$5,000.00) dollars,
for the payment whereof well and duly made, we bind ourselves respectively and our heirs, executors, assign administrators, and legal
representatives, firmly by these presents:

WHEREAS, the City of Lake Charles has passed an ordinance requiring contractors and/or specialist contractors doing busi-
ness in Lake Charles, La. to be duly licensed and bonded in the sum of five thousand (\$5,000.00) dollars.

WHEREAS, the principal is engaged in the business of Plumbing, Mechanical, Electrical and/or Building construction further
described as one in the business of erecting, construction, enlarging, altering, repairing, moving, improving, removing, converting, and/
or demolishing buildings and structures within the City of Lake Charles, La.

WHEREAS, the above principal _____
has been duly licensed by the City of Lake Charles as a _____
Contractor, said license to continue until revoked.

WHEREAS, the principal shall properly, truly, and faithfully comply with the terms of the above mentioned articles as adopted
by the City of Lake Charles and shall indemnify and hold harmless the City, from all cost, expenses, damages, and injury which may be
sustained by the negligence of such principal, his agents, servants, and employees, or his failure to comply to the regulations of the
aforesaid Codes and Ordinances of the City, and shall pay all loss and damage for injuries to persons and property which may lawfully be
claimed against him on account of such failure.

This Bond shall also inure to the benefit of any and all persons who sustain any loss or damage on account of any failure by the
said principal to conform to the regulations of the aforementioned codes, regulations, and Ordinances of the City of Lake Charles, and
any such person sustaining any such loss or damage may bring suit on this bond against the principal and surety or sureties hereon in any
court of competent jurisdiction to recover same.

All remedies upon or under this bond shall be in addition to and cumulative of all other remedies the parties may have at law or
in equity for recovery of any such losses or damages. The liability of the Surety, hereunder, for one or more defaults by the principal shall
not exceed in the aggregate the penal sum of this bond.

It is understood that the surety may cancel its liability hereunder at any time upon giving thirty (30) days written notice in
advance to the principal and the obligee herein named, that the liability of the surety hereunder shall cease upon the expiration of the
thirty (30) days after the delivery of the said notice; provided, however, that such cancellation shall not relieve the surety of any liability
which shall have occurred prior to the effective date of the cancellation.

IN TESTIMONY WHEREOF, witness our hand on this _____ day of, _____,
20____, TO REMAIN IN EFFECT UNTIL 31st day of December, 20____.

WITNESS

PRINCIPAL

BY _____

INSURANCE AGENT: _____

ADDRESS: _____



PHONE: _____

WITNESS

SURETY

BOND FORM APPROVED:

AGENT/ATTORNEY-IN-FACT


Building official

CITY ATTORNEY

NOTE: PLEASE ATTACH POWER OF
ATTORNEY TO BOND

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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