

**Surety Bond of Title Service Agent**

Bond Number \_\_\_\_\_ Agent's Number \_\_\_\_\_ Effective Date \_\_\_\_\_

Know all persons by these presents:

Company/Corporate Name \_\_\_\_\_

Trade Name, if any \_\_\_\_\_

Officer(s) Name(s) \_\_\_\_\_

as Principal, and \_\_\_\_\_  
(name and address of bonding company)

a corporation organized and existing under the laws of the State of \_\_\_\_\_ and authorized to do business in the State of Maryland, as Surety, are held and firmly bound unto the Administrator of Motor Vehicles, State of Maryland in the penalty sum of fifty thousand dollars (\$50,000) lawful money of the United States of America, for the payment of which, well and truly to be made, we and each of us, bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

**Signed, Sealed, and Dated this \_\_\_\_\_ day of \_\_\_\_\_ (year) \_\_\_\_\_**

The condition of this obligation is such that, whereas, the above bounden Principal has or is about to make application to the Administrator of Motor Vehicles for the State of Maryland to engage in the business of transporting to and from the Administration, Motor Vehicle certificates of Title, Registrations, Driver's Licenses, Certified Copies of Records, and other related documents, and in accordance with the Transportation Article of the Annotated Code of Maryland and Regulations promulgated by the Administrator of Motor Vehicles, is required to furnish a Surety Bond.

Now, therefore, if the above bounden Principal shall conduct the business in full compliance with those Sections of the Transportation Article, of the Annotated Code of Maryland, as set forth in the Regulations of the Administrator of Motor Vehicles for the State of Maryland, then this obligation shall be null and void; otherwise to remain in full force and effect. This bond shall be for the use and benefit of the Administrator of Motor Vehicles of the State of Maryland and for any person who may suffer loss by reason of any violation of the above mentioned laws.

This bond shall run concurrently with the period of the license granted to the Principal, and shall remain in full force and effect for any renewal thereof, provided, however, that the penalty of the bond may not be cumulative from year to year, and the total liability of the Surety herein, may not exceed the sum of fifty thousand dollars (\$50,000) regardless of the number of license periods for which the bond is in force.

The Surety may cancel this bond at any time by giving **forty five (45) days** written notice by registered or certified mail to the Administrator of Motor Vehicles, State of Maryland, however, remaining liable for any defaults under this bond, committed prior to the expiration of such forty five (45) day period.

\_\_\_\_\_  
Signature of President/Owner/Partner

\_\_\_\_\_  
Signature of Vice President/Partner

\_\_\_\_\_  
Signature of Treasurer/Secretary/Partner

\_\_\_\_\_  
Signature of Principal (one of the above)

By \_\_\_\_\_

\_\_\_\_\_  
Surety

By \_\_\_\_\_

**Seal  
of  
Surety**

# 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	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES</b>	
		<b>NET WORTH</b>	
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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