## Michigan Department of State Vehicle Uniform Surety Bond

Applicant's First Name	Middle	Last	Date	Date	
Residence Address		City	State	Zip Code	
The above applicant wish	es to apply for a certificate o	of title or registration for the following	ng unit:	•	
Vehicle Title (Year and Make of Vehicle)		(Body Style)	(Body Style) (Vehicle Identification Number)		
Watercraft Title	(Year and Make of Watercraft)				
Watercraft Registration	(Tear and Make of Watercraft)	(Hull Type)	(Hull Num	Der)	
	(Year and Make of Watercraft)	(Hull Type)	(Hull Number)		
Snowmobile Registration	n (Year and Make of Snowmobile)		(Serial Nur	nber)	
requires the applicant to f Michigan Vehicle Code, Environmental Protection	ile this bond as a condition of		ation pursuant to sal 821 of the Natura	ection 217(1) (d) of the al Resources and	
	• •		Authorized Surety Con	1 .,	
	Department of State, its off	or heirs, executors, administrators and employees, for the benefit			
prior owner, any subseque against any expense, loss	ent purchaser of the vehicle, or damage, including reason al for the unit described above	Secretary of State, every employee of watercraft or snowmobile described able attorney fees, by reason of the eye, or an account of any defect in the	above, and their s issuance of a Mich	uccessors in interest, igan certificate of title or	
This bond is subject to the	e following provisions:				
		rty's own name to recover on this bo s deposited, and may recover costs a			
2. The Surety's aggregate	liability to all interested pe	ersons shall not exceed the amount s	et forth above.		
surrendered, the lates		er titled or registered in this state and at the end of three years from the tion this bond.			
The Principal and Surety have executed this bond on			,20		
APPLICANT - PRINCI	PAL	SURETY			
x (Signature of Principal or Aut	norized Agent of Principal)	X (Signature of Authorized Agen	t of Surety Company)		
(Print or Type Name)		(Print or Type Name)			
TR-121 (06/2007)					

## Michigan Department of State Vehicle Uniform Surety Bond

## **Instruction Sheet**

- 1. Before you can title or register a motor vehicle, trailer, trailer coach, watercraft or snowmobile that has no clearly established record of ownership, you must file a *Vehicle Uniform Surety Bond JR-121*) with the Michigan Department of State along with your title or registration application.
- 2. The bond's amount must equal twice the value of the vehicle, watercraft or snowmobile. A surety bond is not needed for a vehicle or snowmobile that is six or more years old with a value of \$2,500 or less. This exemption does not apply to watercraft.
- 3. The person applying for the title or registration, whether an individual, partnership, firm or corporation, and a representative of the insurance company or bonding agency must sign the surety bond. Applicants are named as the "Principal" and must include their complete residence or business address.
- 4. The Michigan Department of Labor and Economic Growth must license the surety company. A duly authorized agent of the surety company must issue the bond. If the agent is a licensed nonresident agent, a licensed resident agent must countersign the bond.
- 5. The effective date of the bond must be no later than the date of application for the title or registration.
- 6. A surety bond is issued for three years. If no claims are made against it at the end of three years, the department will return the bond.

## **Surety Bond Application**

AGENCY NAME:	AGENCY CONTACT:							
		AGENCY EMAIL:						
AGENCY ADDRESS:	City:		State:	Zip:				
CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT?								
NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND?								
<b>SECTION I:</b> 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 S	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 Individ	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								
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	NCOME TAX DUE					
NOTES RECEIVABLE		ALL OTHER TAXES						
INVENTORY		ACCRUALS, PAYRO	LLS, 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 ACCETO								
TOTAL ASSETS		TOTAL LIABILITIES  NET WORTH						
Name of Owners	Name and T	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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