

Vehicle Bond Affidavit (continued)
NRS 482.0000

Bond Number _____

That said bond shall remain in full force and effect for a period of three (3) years after date of said bond.

Signed, sealed and date this _____ day of _____, _____

Principal's Printed Name Principal's Signature

Driver's License Number Phone Number

Surety Name

Surety Street Address City County State Zip Code

Surety Phone Number Surety Fax Number Surety Email Address

By _____
Signature, Attorney-In-Fact for Surety

Printed Name, Attorney-In-Fact

(The Corporate Seal of the Surety Company must be imprinted or affixed to the bond form) (Surety Seal)

(A licensed agent of the issuing company must countersign this form)

Countersigned on behalf of:

Surety Name

this _____ day of _____, _____

Signature, Agent

Printed Name, Agent

Business Name, Agent

Business Address, Agent

All signatures must be original.
Electronic signatures and/or photocopies will not be accepted.
Any alterations will void this form.