

NORTH CAROLINA



BOND

COUNTY

WHEREAS,

, desires to conduct a commercial driver training school in

County, North Carolina, and is desirous to comply with the "Rules and Regulations Governing Licensing of Commercial Driver Training Schools and Instructors" adopted and promulgated by the Commissioner of Motor Vehicles pursuant to Article 14, Chapter 20 of the North Carolina General Statutes, and in accordance with the provisions therewith, hereby files bond as required in Section .0700, of the said rules and regulations

NOW, THEREFORE, , principal and the Guaranty company authorized to do business in the State of North Carolina, surety, acknowledge themselves to be indebted to the School of Bus and Traffic Safety Section of the Division of Motor Vehicles in the sum of \$20,000.00 good and current money of the United States, to the payment thereof we bind ourselves, our executors, administrators, and successors.

Signed, sealed and delivered this the _____ day of _____, 20.

The condition of the foregoing obligation is such that if said principal in this bond will carry out and comply with the terms of each and all contracts for driver training education made and entered into by said principal, acting by and through its owner, owners, officers or agents with any person who enters any such school for driver training education; and will well and faithfully pay back or refund to any such person all amounts collected for tuition or fees in the event said principal fails to comply with the terms of any contract entered into with any student for driver education training; and said principal shall comply with any contract so entered into and give the instruction contracted for and for the full period evidenced by such contract; and thereupon the foregoing obligation shall be deemed to have complied with, otherwise it shall be in full force and effect.

This bond shall be deemed cancelled on the date specified in the written notice served by the surety upon the obligee, such effective date being not less than thirty days after such notice.

IN WITNESS WHEREOF, the makers have executed this contract and the signatories have caused the same to be executed in behalf of the said school upon the date above set forth.

Bond forms change; this is for educational purposes only

PRINCIPAL

Witness:

By _____ (SEAL)

Witness:

SURETY

By _____

AGENT AND ATTORNEY-IN-FACT

SBTS-606 (Rev. 02/00)

SAMPLE.COM
WWW.SINC.COM

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: _____ AMOUNT: _____
 OBLIGEE: _____ EFF. DATE: _____ EXP. DATE: _____
 OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)
 BUSINESS NAME: _____
 BUSINESS PHONE: _____ BUSINESS FAX: _____ Client E-mail _____
 BUSINESS ADDRESS: _____
(Street) (City) (State) (Zip)
 TYPE OF COMPANY CORP LLC DBA PARTNERSHIP HOW MANY OWNERS? _____

DATE BUSINESS ESTABLISHED: _____ 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

SECTION II: GENERAL INFORMATION

OWNER'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)
 ADDITIONAL OWNERS / PARTNERS
 OWNER'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

PERSONAL FINANCIAL 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 for worldwide insurance specialists inc. to obtain consumer information which will be used to determine bonding eligibility.

Worldwide Insurance Specialists, Inc **Toll Free: (888) 518-8011**
2424 W. Missouri AVE **Local (602) 749-0702**
Phoenix, AZ 85015 **Fax: (602) 674-8235**
E-Mail SAM@WWISINC.COM