

KNOW ALL MEN BY THESE PRESENTS:

That we, _____,

of _____, as Principal, and

City

State

_____, a corporation duly licensed to do business in the State of North Dakota, as Surety, are held and firmly bound to the State of North Dakota in the penal sum of TWO THOUSAND (\$2,000) DOLLARS for the payment of which, will and truly to be made, we bind ourselves and our legal representatives jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, that whereas, the Principal has applied for a certificate to engage for hire in the business of constructing water wells under the provisions of Chapter 43-35 of the North Dakota Century Code.

NOW THEREFORE, if the said Principal shall faithfully perform any work done under said certificate in conformity with all water well contracts undertaken by him and all applicable laws of the State of North Dakota, and any and all rules and regulations enacted or to be enacted by the North Dakota Department of Health and the North Dakota Board of Water Well Contractors when this obligation to be void, otherwise to remain in full force and effect.

The aggregate liability of the Surety hereunder to all persons shall in no event exceed the sum of TWO THOUSAND (\$2,000) DOLLARS.

The bond is continuous and may be terminated at any time by the Surety upon sending notice in writing by registered mail to the North Dakota State Board of Water Well Contractors, Bismarck, North Dakota, and to the Principal at the address stated on this bond, and at the expiration of thirty (30) days from the mailing of said notice, this bond shall ipso facto terminate and the Surety thereon shall be relieved from any liability for any acts or omissions of the Principal subsequent to said date.

Dated this _____ day of _____, 20____.

Principal

Countersigned

By _____
North Dakota Resident Agent

By _____
Surety

ACKNOWLEDGMENT OF PRINCIPAL IF AN INDIVIDUAL OR FIRM

STATE OF NORTH DAKOTA)
 : SS.
County of _____)

On this _____ day of _____, 20____,
before me, a notary public within and for said County and State, personally appeared _____, known to me to be the person who is described in and who executed the within instrument, and acknowledged to me that he executed the same.

Bond forms change; this is for educational purposes only

Notary Public, _____ County, ND
My Commission expires _____

County of _____) : SS.

On this _____ day of _____, 20 ____,
before me, a notary public within and for said County and State, personally appeared _____,
known to me to be the _____
of the corporation that is described in and that executed the within instrument, and
acknowledged to me such Corporation executed the same, thereunto duly authorized.

Notary Public, _____ County, ND
My Commission expires _____

ACKNOWLEDGMENT OF SURETY
(By Corporate Officer)

STATE OF NORTH DAKOTA)
: SS.
County of _____)

On this _____ day of _____, 20 ____,
before me a notary public, within and for said County and State, personally appeared _____,
known to me to be the aforesaid officer of the
Corporation that is described in and that executed the within instrument, as Surety, and
acknowledged to me that such Corporation executed the same.

Notary Public, _____ County, ND
My Commission expires _____

ACKNOWLEDGMENT OF SURETY
(By an Attorney-in-Fact)

STATE OF NORTH DAKOTA)
: SS.
County of _____)

On this _____ day of _____, 20 ____,
before me, a notary public within and for said County and State, personally appeared _____,
known to me to be the person who is
described in and whose name is subscribed to the within instrument as the attorney-in-fact of
_____ and acknowledged to me that he subscribed the name of
the _____ thereto as Surety and his own name as attorney-in-fact.

Notary Public, _____ County, ND
My Commission expires _____

NO. _____	AKOTA LICENSE'S BOND Construction	On Behalf of _____	Located at _____	State of North Dakota	by State Board of Water Well as this _____ day of _____, 20 ____	_____	as to form and execution this day of _____	_____	Attorney General	By _____ Assistant
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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 YES ☐ NO ☐ DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS YES ☐ NO ☐
BONDS FOR ANY PURPOSE? AGAINST YOU?
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.

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