

OHIO ATHLETIC COMMISSION

Surety Bond for Treasurer State of Ohio (\$2500)

The purpose of this Surety Bond is to insure the payment of tax revenue necessary for the proper functioning of any public or private competition that involves the sports of boxing, kickboxing, karate, tough person contests, wrestling or any other form of boxing or mixed martial arts. This is limited to the Treasurer of the State of Ohio as defined by the rules bearing agency level 3773 of the Ohio Administrative Code. The person desiring to obtain a Promoter's license is referred to for the purpose of this document as "Promoter-Applicant."

Date Bond Executed: _____ Effective Dates: From: _____ To: _____

Promoter-Applicant Name: _____ Phone Number: _____

Promoter - Applicant Address: _____

Street City State Zip

Business Name: _____ Phone Number: _____

Business Address: _____

Street City State Zip

Type of Organization of Promoter-Applicant: ☐ Joint Venture ☐ Corporation ☐ Partnership ☐ Proprietorship

State of Incorporation of Promoter-Applicant: (If Applicable) _____

Surety Name: (hereinafter "Surety": _____ Phone Number: _____

Surety Business Address: _____

Street City State Zip

I, Promoter-Applicant, and Surety are indebted and bound to the Ohio Athletic Commission for the use and benefit of any person who is injured or damaged by acts or omissions of the Promoter-Applicant in their performance of activities subject to all rules and regulations under section 3773 of the Ohio Revised Code and all rules bearing agency level 3773 of the Ohio Administrative Code bind ourselves, our legal representatives and successors jointly and severally.

The conditions of this obligation is that the Promoter-Applicant desires to hold any public or private competition that involves the sports of boxing, kickboxing, karate, tough person contests, wrestling or any other form of boxing or mixed martial arts, as defined by rules bearing agency level 3773 of the Ohio Administrative Code and that as a applicant for a Promoter's license, is submitting a surety bond in the amount not less than two thousand five hundred dollars (\$2,500.00).

If the Promoter-Applicant and all of the Promoter-Applicant's agents and employees faithfully and honestly perform and abide by all the obligations imposed by the rules bearing agency level 3773 of the Ohio Administrative Code and all rules or orders made by the Ohio Athletic Commission pursuant to the Ohio Administrative Code, then this obligation shall be null and void, otherwise it shall remain in full force and effect.

This surety bond is intended to comply with the requirements under all rules bearing agency level 3773 of the Ohio Administrative Code and expressly provides that:

When the Ohio Athletic Commission and the Treasurer of the State of Ohio sustain a loss or damage by reason of failure of the promoter-Applicant to faithfully perform and fulfill their obligations as set forth in the Ohio Administrative Code section 3773 shall file a claim with the Surety for such loss or damage, and if the claim is not paid, may bring an action in their own name based upon the bond and recover against the Surety. Any fault, negligence, error or omission, failure to fulfill contractual obligation, whether written or oral, or any other act or failure to act by the Promoter-Applicant which results in loss or damage, or any violation by the Promoter-Applicant of any provision of the Ohio Administrative code section 3773 shall result in a claim for full recovery from their bond. This would include any expenses attained to retrieve payment.

The Ohio Athletic Commission may file a claim with the Surety on behalf of the Treasurer of the State of Ohio when they have sustained a loss or damage by reason of the Principal's act or failure to act as described in the preceding paragraph and the Surety shall pay the total amount of the claim for recovery from the bond.

The total aggregate liability of the Surety with respect to this bond shall be limited to the sum of \$_____.

The Surety may cancel this bond and be relieved of further liability hereunder by delivering a sixty (60) day notice to the Promoter-Applicant at the current address they have listed upon this document and a copy of the letter sent to the Ohio Athletic Commission, 242 Federal Plaza West Suite 405, Youngstown, Ohio, 44503; however, such cancellation shall not operate to relieve, release, or discharge the Surety from any liability already accrued or which shall accrue before the expiration of the sixty (60) day period.

The Promoter-Applicant and the Surety or either of them if served notice of any action brought against the Promoter-Applicant or Surety under this bond, written notice of filing of such action shall immediately be given by the Promoter-Applicant or Surety as each is served or notified to the Ohio Athletic Commission, 242 Federal Plaza West Suite 405, Youngstown, Ohio, 44503

IN WITNESS WHEREOF, the name of the Promoter-Applicant is affixed hereto, and the name of the Surety and the signature

of its duly appointed Attorney in Fact are affixed the _____ day of _____, _____.

By:_____

By:_____

Principal-Applicant

Attorney-in-Fact for Surety

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.

Worldwide Insurance Specialists, Inc
2424 W. Missouri AVE
Phoenix, AZ 85015
E-Mail SAM@WWISINC.COM

Toll Free: (888) 518-8011
Local (602) 749-0702
Fax: (602) 674-8235