

CONTRACTOR'S BOND

CITY OF CLEVELAND

KNOW ALL MEN BY THESE PRESENTS,
 THAT _____ as principal,
 doing business as _____ Company, and
 _____ as surety are held
 and firmly bound unto the City of Cleveland or to any of its officers, for the use of any person,
 persons, firm or corporation with whom such principal shall contract to construct, alter, repair,
 add to, subtract from, reconstruct or remodel any building, structure, or appurtenance thereto or
 any part thereof, in accordance with the provisions and the requirements of the Codified Ordinances
 of the City of Cleveland, in the penal sum of _____ Dollars (_____), lawful
 money of the United States, for the payment of which sum well and truly to be made, we bind
 ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly
 by these presents.

Sealed with our seals and dated this _____ day of _____, _____

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH that, whereas the
 above bounden principal has made application to the Director of Building and Housing for a
 Certificate of Registration as a Contractor to engage in the business of constructing, altering,
 repairing, adding to, subtracting from, reconstructing, or remodeling any building, structure, or
 appurtenance thereto or any part thereof, as required by the Codified Ordinances of the City of
 Cleveland, during the period beginning _____, and ending the last day of
 _____.

NOW, THEREFORE, if the said principal shall well and truly indemnify, keep and save
 harmless the City of Cleveland, or any of its agents or officials for the use of any person, persons,
 firm, or corporation with whom such Contractor shall contract to do work, and shall indemnify
 and pay any such person, persons, firm or corporation for damage sustained on account of the
 failure of such Contractor to perform the work so contracted for in accordance with the provisions
 of the Codified Ordinances of the City of Cleveland, and any and all lawful rules and regulations
 promulgated under the authority thereof, and from or by reason or on account of anything done
 under and by virtue of any permits issued under such Registration for the doing of any work
 required to be done in the construction, alteration, repair, addition to, subtraction from,
 reconstruction or remodeling of any building, structure, or appurtenance thereto or any part
 thereof, then this obligation shall be null and void; otherwise, to remain in full force and effect.

THE LEGAL FORM AND CORRECTNESS
 OF THE WITHIN INSTRUMENT IS HEREBY
 APPROVED

 DIRECTOR OF LAW

By _____
 ASSISTANT

Date _____

Principal _____ (Signature)

Address _____

Surety _____ (Seal)

Address _____

Attorney-in-fact _____

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