

STATE OF OREGON

Oregon Liquor Control Commission
LICENSEE'S SURETY BOND

KNOW ALL MEN BY THESE PRESENTS:

That _____, DBA _____ as Principal, _____, organized and existing under and by virtue of the laws of the state of _____, and authorized to transact a surety business in the state of Oregon pursuant to the terms of ORS Chapter 747, (hereinafter called the Surety), as Surety, are held and firmly bound unto the Oregon Liquor Control Commission in the sum of **One Thousand and no/100 dollars (\$1,000.00)**, lawful money of the United States of America, for the payment whereof, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THE FOREGOING OBLIGATION IS SUCH THAT:

Whereas, the Principal has made application to the Oregon Liquor Control Commission for a license to do business as a **Wine Self-Distribution** Licensee within the meaning of the Liquor Control Act of the state of Oregon as amended, and is required by the provisions of said act and by order of said Commission to furnish a bond in the sum above stated, conditioned as herein set forth, for a term beginning on the ___ day of _____, and ending on _____,

Now, therefore, if said Principal shall well and truly pay any fine or fines imposed against said Principal for any violation of any provision of the Oregon Liquor Control Act or of any administrative rule adopted pursuant thereto, and said Principal shall pay all license fees, taxes on agricultural products used for making wine, privilege taxes, taxes on alcoholic liquors, together with penalties and interest thereon, levied or assessed against said Principal under the provisions of the Oregon Liquor Control Act or of any other act of the state of Oregon relating to the importation, manufacture, distribution, sale or taxation of alcoholic liquors within the state of Oregon, then this obligation shall be void; otherwise to remain in full force and effect, the Surety being obligated to pay any fines, fees, taxes, penalties and interest not immediately paid by Principal.

The Surety herein shall be released and discharged from any and all liability to the Oregon Liquor Control Commission accruing on or under this bond after the expiration of thirty days from and after the date upon which Surety shall have lodged in the hands of the Oregon Liquor Control Commission a request in writing to be released and discharged from such liability, but such release or discharge shall not operate to relieve said Surety from any liability already accrued or which may accrue on or under this bond prior to the expiration of said thirty-day period.

In witness whereof, the Principal has hereunto set his hand and seal, and the Surety has caused these presents to be duly executed by its statutory agent and attorney in fact, thereunto duly authorized, and its corporate seal to be hereunto affixed, all done this _____ day of _____, 20____.

PRINCIPAL IS (Check one): Individual Ownership Corporation Limited Liability Company (LLC)

(Principal / Title)

(Principal / Title)

(Principal / Title)

(Principal / Title)

SURETY:

By _____
(Surety)

By _____
(Attorney in Fact)

(Affix Surety Corporate Seal)

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**
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