



pennsylvania
DEPARTMENT OF BANKING
AND SECURITIES

MARKET SQUARE PLAZA | 17 N SECOND STREET, Suite 1300 | HARRISBURG, PA 17101
Ph 717.787.3717 Fx 717.787.8773 W www.dobs.state.pa.us

Bond No. _____

SALES FINANCE COMPANY BOND – PENNSYLVANIA BANK

WHEREAS, Department means the Department of Banking and Securities of the Commonwealth of Pennsylvania located at 17 N. 2nd Street, Suite 1300, Harrisburg, Pennsylvania 17101, and

WHEREAS, Principal means _____,
(Name of Pennsylvania Bank)

with its principal place of business at _____,
(Principal's Address)

and phone number of _____.
(Principal's Phone Number)

WHEREAS, reference is made herein to the "Consumer Credit Code" related to motor vehicle sales finance (12 Pa. C. S. §6201, et. seq.), and

WHEREAS, Principal, is a banking institution incorporated under the laws of the Commonwealth of Pennsylvania, incorporated under the laws of the United States and authorized to execute bonds of suretyship in the Commonwealth of Pennsylvania on its own behalf under the provisions of the Consumer Credit Code ("Code"), and

WHEREAS, Principal has applied to the Department for a license under the provisions of the Code, and

WHEREAS, the granting of the license by the Department to Principal is conditioned upon Principal obtaining a bond in the amount of ten thousand dollars (\$10,000), and

NOW THEREFORE, KNOW ALL MEN BY THESE PRESENTS that Principal and is held and firmly bound unto the Commonwealth of Pennsylvania in the just and full sum of ten

thousand dollars (\$10,000) to the payment whereof, well and truly to be made, we bind ourselves, and our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents:

1. **Condition of the Obligation.** If Principal shall faithfully:
 - a. comply with and abide by the provisions of the Code; and
 - b. comply with and abide by all the rules and regulations of the Department issued in accordance with the Code; and
 - c. pay any moneys due to the Commonwealth, the Department, or any person or persons who were residents of the Commonwealth at the time the cause of actions arose, any and all moneys due under the provisions of this Code,

then this obligation shall be null and void, otherwise to be and remain in full force and effect.

2. **Effective Date.** The effective date of this bond is set forth below.
3. **Duration of Bond.** This bond shall continue in full force and effect indefinitely, subject, however, to cancellation.
4. **Cancellation.** Principal may elect to cancel this bond at any time by filing with the Secretary of Banking and Securities of the Commonwealth of Pennsylvania (“Secretary”) a thirty (30) day written notice of such cancellation. The bond cancellation shall be effective on the thirtieth (30th) day after the filing of the written notice of cancellation. Principal shall remain liable for all transactions associated with the loaning of money at interest by Principal during the term of this bond until the effective date of the cancellation.
5. **Principal’s Liability.** Regardless of the number of years this bond remains in force, the aggregate liability of Principal for any and all claims or judgments to one or more claimants in no event shall exceed the full penal sum.
6. **Default.** Upon the happening of any default of the conditions and obligations assumed under this bond and the declaration of a default by the Secretary, or his designee, the Secretary, or his designee, shall notify the Principal and Surety of such default. Said Surety shall pay the amount claimed within 30 days of the date of notice. If the Surety does not pay the amount claimed within 30 days after the notice of default, Principal and Surety hereby authorize and empower any attorney of record in Pennsylvania or elsewhere to appear for them, or either of them, and after one or more declarations filed to confess judgment against them in favor of the Commonwealth, to its use or the use of its certain attorney or assigns, for an amount up to the penal sum of the bond, together with costs of suit and five per centum, added as attorney fee, and they do further release all errors, and waive the right of exemption, and stay of execution and authorize the levy of their monies.
7. **Events Not Affecting Bond Liability.** This bond shall not be discharged by:

- a. the recovery of any specific amount of charges for examination, damages, costs, judgments, fines or penalties obtained in any specific action. The bond shall be in full force and effect until the full amount of the bond of ten thousand dollars (\$10,000) shall have been paid by reason of any number of charges for examination, damages, costs, judgments, fines or penalties to which the Principal may have become subjected; or
- b. sums due, where the right to which sums did not arise during the license year for which the license found on the application which this bond accompanied was granted.

8. **Department Remedies.** Nothing herein shall limit the Department from seeking any remedy, in addition to the forfeiture of this bond, which may be authorized or provided under any law.

9. **Remedies.** If any person shall be aggrieved by the misconduct of a licensee and shall recover judgment against such licensee, such person may, on any execution issued under such judgment, maintain an action upon the bond of the licensee in any court having jurisdiction of the amount claimed provided the Department assents thereto.

10. **Disclosure.** Principal agrees that the Department may publish, divulge or otherwise disclose to any person or government entity this bond, the contents of this bond, and any information or material related to this bond. The information which may be disclosed includes, but is not limited to, pleadings, other submissions and orders related to any administrative proceedings, when such publication divulgement or disclosure is related to an administrative, judicial or other legal proceeding concerning this bond.

11. **Headings.** The headings used herein are for descriptive purposes only and have no legal force or effect.

IN WITNESS WHEREOF, Principal has set its hand, intending to be legally bound as of the _____ day of _____, 20__ (“Effective Date”).

PRINCIPAL:

(Print Principal Name)

Signed this _____ day of _____, 20__.

By: _____
(Signature)

(Title: i.e. Attorney in Fact)

ATTEST OR WITNESS:

(Where Required)

Approved as to legality and form:
PRE-APPROVED OAG 10/27/14
/Robert A. Mulle/
Office of Attorney General
PRE-APPROVED OGC 9/5/14
/Shawn E. Smith/
Office of General Counsel
Form No. 3-FA-13.1

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