

**SURETY BOND**

**KNOW ALL MEN BY THESE PRESENTS:**

That \_\_\_\_\_  
\_\_\_\_\_, as Principal, and \_\_\_\_\_  
\_\_\_\_\_, as Surety, are held and firmly bound unto the

COMMISSIONERS OF PUBLIC WORKS, Greenwood, South Carolina, as OBLIGEE, in the  
sum of \_\_\_\_\_ Dollars  
for the payment whereof well and truly to be made, we bind ourselves, our successors and assigns jointly  
and severally, firmly by these presents.

WHEREAS, the Principal has applied to OBLIGEE and requested that said OBLIGEE furnish utility services in  
connection with the operation of \_\_\_\_\_  
\_\_\_\_\_ and

WHEREAS, the OBLIGEE requires that similar customer applying for utility services place with it  
a cash deposit before furnishing such services; and

WHEREAS, the Principal wishes to furnish this surety bond in lieu of a cash deposit; and

WHEREAS, both the Principal and Surety are authorized to execute and deliver to OBLIGEE this bond in  
the amount of \_\_\_\_\_ Dollars, guaranteeing prompt  
and full payment to OBLIGEE of all amounts due from principal for or in connection with utility services  
furnished by OBLIGEE to the principal.

NOW, THEREFORE, the conditions of this obligation are such that if the Principal shall fully and promptly, before  
said charges become delinquent, pay the OBLIGEE for utility services furnished to the Principal, then this  
obligation shall not be due; otherwise it shall remain in full force and effect in law. In the event that the Principal  
shall fail to promptly and fully pay to OBLIGEE all charges made by it for the furnishings of utility services, then  
the Principal and Surety are jointly and severally bound and obligated to the OBLIGEE to fully pay to it and  
indemnify it from all pecuniary loss or expense, including attorneys' fees resulting from the breach and failure by  
the principal to pay all charges for all services furnished to it.

Principal and Surety further covenant and agree with OBLIGEE that if the Principal fails to promptly and fully pay  
to OBLIGEE all charges for said utility services that the OBLIGEE is authorized to immediately terminate such  
services.

It is hereby agreed that the effective date of this obligation is \_\_\_\_\_, 20\_\_\_\_,  
and that the obligations of Principal and Surety shall continue until released in writing by OBLIGEE or canceled  
by Surety as hereinafter provided. This bond may be canceled by Surety giving written notice to Principal and  
OBLIGEE by certified mail, return receipt requested, at least sixty (60) days prior to the effective date of such  
cancellation. Such cancellation shall not effect any liability incurred or accrued under this Bond prior to the  
effective date of such cancellation.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**PRINCIPAL**

**SURETY**

\_\_\_\_\_  
Company

\_\_\_\_\_  
Company

By: \_\_\_\_\_

By: \_\_\_\_\_

Its: \_\_\_\_\_

Its: \_\_\_\_\_

## 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	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>NAME OF OWNERS</b>	<b>NAME &amp; TITLE OF OFFICERS</b>	<b>PERCENTAGE OF OWNERSHIP</b>	

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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**Phoenix, AZ 85015**                          **Fax: (602) 674-8235**  
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