

**State of South Dakota
Division of Banking
217¹/₂ W. Missouri Ave.
Pierre, SD 57501
(605) 773-3421**

MORTGAGE LENDER BOND (SOUTH DAKOTA)

Lender (Licensee)	Surety
Licensee Address	Surety Home Office Address
City State Zip	City State Zip

ADMINISTRATOR: Division of Banking, State of South Dakota

BOND NUMBER: _____

THE ABOVE NAMED LENDER AND SURETY (WHO IS DULY QUALIFIED TO DO BUSINESS IN THE STATE OF SOUTH DAKOTA) ARE HEREBY BOUND IN THE PENAL SUM OF \$25,000 FOR PAYMENT UNDER THE FOLLOWING TERMS AND CONDITIONS:

1. The above-named lender is licensed or has applied to the Division for a license to conduct business as a mortgage lender pursuant to SDCL 54-14-12 et. Seq.
2. The State of South Dakota or any person(s) suffering loss or damages shall have the right to bring an action on this bond against the principal or surety.
3. This bond is one continuing obligation and in no event shall the liability of the surety exceed the penal sum of \$25,000 for the aggregate of any claims occurring during the term of this bond.
4. This bond is conditioned on the Principal's compliance with all provisions of SDCL Chapter 54-14 and any rules adopted pursuant to that chapter and the payment of any amounts owed by the Principal to the State of South Dakota or another person.
5. The surety shall have the right to terminate its obligation under this bond by filing written notice with the Division at least 30 days prior to the effective date of such termination. Obligations of the surety arising prior to the effective date shall not be affected by the termination.
6. In the event the surety under this bond makes full or partial payment on this bond, said surety shall immediately give written notice of such payment to the South Dakota Division of Banking.

This bond shall take effect on _____ and shall continue in force until it is terminated or cancelled.

EXECUTED ON this _____ day of _____ ~ 20_____

Lender
BY _____

NOTE: Persons executing for surety other than corporate officers must attach Power of Attorney

SURETY _____

BY _____

ADDRESS _____

PHONE# _____

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