

DEPARTMENT OF
COMMERCE AND INSURANCE
TENNESSEE ATHLETIC COMMISSION
500 JAMES ROBERTSON PARKWAY
NASHVILLE, TN 37243-1157
615-532-5129
FAX 615-741-6470

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS:

That _____ (Company name used)
of _____ in the State of _____
(City/County)

as Principal, and, a surety _____ company authorized to do business in the State
of Tennessee and whose principal office is located in _____
(City/County)

State of _____ as Surety, are jointly and severally held and firmly bound to make payable
the State of Tennessee, as Oblige, in the sum of twenty-five thousand dollars (\$25,000) lawful money of the United
States, to be paid to said Oblige, for which payment well and truly to be made we bind ourselves and our legal
representative's.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, that if the said Principal upon receipt of a
license from the Tennessee Athletic Commission to promote professional boxing or other combat matches or
exhibitions, will perform all of its contractual obligations (whether expressed or implied) to combatants incurred in
connection with the promotion of such matches or exhibitions in the State of Tennessee, then this obligation is to be
void, otherwise to remain in full force and effect until _____ 20 _____ unless renewed by
Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing, by certified mail, to
the Tennessee Athletic Commission and to the Principal, and at the expiration of thirty (30) days from the mailing of
said notice, this bond shall terminate and the Surety shall thereupon be relieved from any liability for any acts or
omissions of the Principal subsequent to said date.

Signed this day of _____ 20 _____

Principal Surety

By:

Signed and acknowledged by Surety's agent _____

before me this day of _____ 20 _____.

(NOTARY SEAL)

Notary Public: _____

My Commission expires: _____

(Date)

INTEGRITY 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: _____ EFF.DATE: _____ EXP.DATE: _____
TYPE OF COMPANY CORP ☐ LLC ☐ DBA ☐ PARTNERSHIP ☐ AMOUNT: _____
OBLIGEE: _____
OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)

SECTION II: GENERAL INFORMATION

APPLICANT'S NAME: _____ SPOUSE NAME _____
SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)
BUSINESS NAME: _____
BUSINESS PHONE: _____ BUSINESS FAX: _____ Client E-mail _____
BUSINESS ADDRESS: _____
(Street) (City) (State) (Zip)
DATE BUSINESS BEGAN UNDER CURRENT NAME: _____ BUSINESS TAX ID: _____
HAS ANY COMPANY REFUSED TO ISSUE YES ☐ NO ☐ DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS YES ☐ NO ☐
BONDS FOR ANY PURPOSE? AGAINST YOU?
HAS APPLICANT EVER FAILED IN BUSINESS? YES ☐ NO ☐ HAS APPLICANT EVER FILED BANKRUPTCY? YES ☐ NO ☐

IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:

SECTION III: ADDITIONAL OWNERS / PARTNERS

APPLICANT'S NAME: _____ SPOUSE NAME _____
SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

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 to obtain consumer information which will be used to determine bonding eligibility This information will be held in the strictest confidence no premium financing will be accepted as premium is earned in full.

Integrity Bonds Inc

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Local (480) 626-8916

Fax: (602) 674-8235