



BOND NUMBER _____

DEALER OF MANUFACTURED HOMES BOND

(As required by Tennessee Code Annotated, Section 68-126-206)

KNOW ALL MEN BY THESE PRESENTS:

That we _____ located in _____
(Applicant) (City/County)

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

as Surety, are held and firmly bound unto the State of Tennessee, Department of Commerce and Insurance, Obligee, in the sum of Twenty-Five thousand dollars (\$25,000), lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IF SUCH, that if the said Principal, upon receipt of a license from the Commissioner of Commerce and Insurance to engage in business as a Dealer of manufactured homes in the State of Tennessee, will fully comply with the Uniform Standards Code for Manufactured Homes and Recreational Vehicles Act, Tennessee Code Annotated (Title 68-126-201 through 68-126-215), the Tennessee Manufactured Home Anchoring Act, (Tennessee Code Annotated (Title 68, Chapter 126, Part 4)), and all rules promulgated thereunder, including all amendments, then this obligation is to be void, otherwise to remain in full force and effect for the licensure period, 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 Office of Tennessee State Fire Marshal and to the Principal, and at the expiration of thirty-five (35) days from mailing of said notice, this bond shall terminate and the Surety shall thereupon be relieved from any liability of any acts or omissions of the Principal subsequent to said date.

Dated this _____ day of _____, 20____

PRINCIPAL: _____

BY: _____
(Signature)

SURETY: _____

(Typed or Printed Name of Agent)

(Name and Address of Company)

(Address)

IN#1603

RDA# 2225

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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