

BOND FOR ATTORNEY SETTLEMENT AGENT
Principal as Individual

(PURSUANT TO SECTION 6.1-2.21 OF THE CODE OF VIRGINIA)

KNOW ALL MEN BY THESE PRESENTS, That _____
_____ of _____

as principal, and _____
a corporation organized and existing under the laws of the State of _____

and authorized to do business in the Commonwealth of Virginia, as Surety are held and firmly bound unto the COMMONWEALTH OF VIRGINIA as Oblige, or to any aggrieved person who may be injured by the Principal as hereinafter provided in the penal sum of ONE HUNDRED THOUSAND DOLLARS (\$100,000.00) for the payment of which, well and truly to be made, we and each of us bind ourselves, our heirs, successors, and assigns jointly and severally, firmly by these presents.

SIGNED, SEALED AND DATED THIS _____ day of _____, 20____

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

WHEREAS, the Principal is required to register with the Virginia State Bar as a settlement agent pursuant to Chapter 1.3 of Title 6.1 of the Code of Virginia and is thereby required to maintain a surety bond.

NOW THEREFORE, the condition of this obligation is such that if the Principal shall be registered with the Virginia State Bar to act as a settlement agent and if the Principal shall act in such capacity in full compliance with the provisions of the laws of the Commonwealth of Virginia and rules, regulations, and orders prescribed by the Virginia State Bar pertaining to Settlement Agents, then this obligation shall be null and void; otherwise to remain in full force and effect:

CONDITIONED FURTHER, that the Commonwealth of Virginia may maintain any action against this bond for its use and benefit or for the use and benefit of any aggrieved person or any aggrieved person may maintain an action in its own name against this bond to recover damages as a result of the principal breaching any of the above-mentioned laws, regulations, or orders; provided, however, that regardless of the number of years this bond remains in effect in no event shall the aggregate liability of the Surety total claimants for all claims under this bond exceed the penal sum of this bond.

The Surety may be released from liability for future breach of the condition of this bond upon giving (60) day written notice to the Principal and the Virginia State of Commonwealth of its desire to be released.

IN WITNESS WHEREOF, the said Principal has hereunto set his hand and seal and the said Surety has caused these presents to be signed by its duly authorized officer or Attorney-in-Fact and its corporate seal affixed on the day and year first written above.

(SEAL)

(PRINCIPAL)

BY: _____

(SEAL)

BY: _____

Attorney-in-Fact

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 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

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

Toll Free: (866) 420-2613

Local (480) 626-8916

E-Mail info@integritybonds.com

Fax: (602) 674-8235