



**LICENSE SURETY BOND**

**CODE ENFORCEMENT BUREAU**

301 King Street, Room 4200

Alexandria, Virginia 22314

KNOW ALL MEN BY THESE PRESENTS, that \_\_\_\_\_

of \_\_\_\_\_, as PRINCIPAL, and

\_\_\_\_\_ a company/corporation organized and existing under the laws of the State of \_\_\_\_\_ and being duly licensed and authorized to transact business in the Commonwealth of Virginia, AS SURETY, are held and firmly bound unto the City of Alexandria, a municipal corporation of Virginia, AS OBLIGE, for the use and benefit of the public and/or any person aggrieved by a code compliance violation as determined by the building official of the City, in the penal sum of **FIVE THOUSAND DOLLARS (\$5,000.00)** lawful money of the United States of America, for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly, severally and firmly by these presents.

WHEREAS, the principal has made application for a

**HOME IMPROVEMENT CONTRACTOR'S LICENSE**

pursuant to the Code of the City of Alexandria, Virginia, 1963, as amended, revised and/or recodified, to engage in business in the City for a period of one year commencing from the date of license issued; which license must be obtained or renewed yearly thereafter; and whereas the City Code required this bond to cover the term of said license, if it is issued to the principal, and any subsequent renewal of said license.

NOW, THEREFORE, in consideration of any said license now or hereafter being granted, issued or renewed, the condition of this obligation is such that, said principal shall:

1. Along with his or its agents and employees, comply with and faithfully observe and obey all applicable rules, regulations, ordinances and provisions of the City Code of the City of Alexandria, now or hereafter existing and all other applicable laws now or hereafter existing affecting or relating to the carrying on of such business and work including, but not limited to, the Virginia Uniform Statewide Building Code; and
2. Indemnify and save harmless the City of Alexandria, its officials, employees and any members of any applicable hearing panel or other City Board or Commission, and their successors or any other person from and on account of any and all claims, demands, damages, costs, expenses, attorneys' fees, losses, actions, suits, judgments or liabilities of any kind whatsoever, arising out of the issuance of said license and the aforesaid principal's noncompliance with any applicable code provision, or obtained against the said City and/or any or all of the persons above enumerated.

Compliance with all and several of the above-enumerated items shall make this bond void; otherwise, it shall remain in full force and effect.

PROVIDED, HOWEVER, in no event shall the aggregate of liability of the surety under this bond for any and all claims exceed the sum of this bond.

It is hereby expressly understood and AGREED that:

- A. This bond shall not be interpreted, construed or otherwise held to be a contract performance, payment or completion bond.
- B. Any and all claims upon this bond must be made by written notice delivered to the principal, surety and to the building official of the City of Alexandria.
- C. The term of this bond is indefinite; provided, however, the surety may cancel this bond by giving written notice of cancellation to the principal and to the building official of the City of Alexandria at least thirty (30) days prior to the effective date of such cancellation.

**IN WITNESS WHEREOF**, said principal and said surety have signed, sealed, and dated these presents this day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Principal (SEAL)

By: \_\_\_\_\_ (SEAL)

Title: \_\_\_\_\_

\_\_\_\_\_  
Surety (SEAL)

BY \_\_\_\_\_ (SEAL)

Attorney-in-Fact  
(Affidavit must be attached)

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## 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**  
**2424 W. Missouri AVE**                      **Local (602) 749-0702**  
**Phoenix, AZ 85015**                            **Fax: (602) 674-8235**  
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