

BOND NO. _____

We, _____, as the Principal and a licensed Washington State Lottery Retailer, and the _____, a corporation organized under the laws of Washington State and authorized to transact the business of surety as a SURETY in Washington State, are legally bound to Washington's Lottery, Olympia, Washington, in the amount of three thousand five hundred dollars (\$3,500). We bind ourselves, our heirs, personal representatives, administrators, successors, and assigns, jointly and severally to pay the three thousand five hundred dollars (\$3,500) with this bond.

The condition of this obligation is that the Principal is a licensed Washington State Lottery Retailer or has applied to become a retailer. As a condition of being a retailer or becoming one, the Washington's Lottery requires that the Principal provide to the Lottery a security that will guarantee the payments owed to the Lottery for lottery products. See RCW 67.70.040(1)(i), RCW 67.70.070, WAC 315-04-095, WAC 315-06-035, and WAC 315-30-070. This security obligation may be evidenced by a surety bond.

In the event that the Principal fully complies with all of the provisions of RCW 67.70.040(1)(i), WAC 315-06-035, and WAC 315-30-070, and any amendments to these WAC provisions, then this obligation shall be void. Otherwise, the obligation will continue to exist, provided however, that the total liability of the Surety shall be limited to the amount specified in this bond. The bond may be cancelled by the Surety by sending notice in writing to the Principal and to Washington's Lottery, stating when liability shall terminate, and not less than thirty days after the notice. This termination of liability may occur only as a result of subsequent acts or omissions by the Principal.

Principal

Principal

Principal

BY: _____ Attorney in Fact

Signed and dated this _____ day of _____
(month) (year)

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 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 ☐

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.

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