AGENT USE ONLY BOND NUMBER



HCC Surety Group
601 S. Figueroa Street, Suite 1600, Los Angeles, California 90017

## CALIFORNIA CONTRACTORS LICENSE BOND APPLICATION

A BUSINESS INFORMATION							
BUSINESS/ LICENSE NAME				CONTRACTORS LICENSE NUMBER or APPLICATION FEE NUMBER			
IF RME/ RMO, QUALIFYING INDIVIDUALS NAME					701	EIO/MIONT EE NOMBER	
IF KINE/ KINO, QUALIFTING INDIVIDUALS NAME							
ADDRESS				YEARS LICENSED			
CITY/ STATE/ ZIP				LICENSE CLASSIFICATION(S)			
BUSINESS PHONE BUSINESS FAX					REQUESTED EFFECTIVE DATE		
B INDEMNITOR INFORMATION					DIDTI	A COUNT OF OUR TY AND AREA	
FIRST NAME/ MIDDLE NAME/ LAST NAME		DRIVER'S LICENSE NUI	MBER	DATE OF	BIRTH	SOCIAL SECURITY NUMBER	
HOME ADDRESS					EMAIL ADDRESS	3	
CITY/ STATE/ ZIP	_		HOME	E PHONE N	L UMBER	HOME FAX NUMBER	
<ol> <li>To reimburse American Contractors Indemnity Company and/or U. S. Specialty Insurance Company referred to hereafter as "Surety," upon demand for all payments made for and to indemnify Surety from all loss, claim payments, costs and expenses, including attorneys' and construction consultants' fees, which the Surety incurs;</li> <li>To pay Surety an advance premium for the first year or a fractional part thereof and to pay annually thereafter such annual premium for suretyship until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee;</li> <li>Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned;</li> <li>The place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California; and</li> <li>Surety is authorized to investigate, at any time, the undersigned's credit, employment history, and department of motor vehicle records.</li> </ol> Regardless of the date of signature, this indemnity is effective as of the date of execution and renewal of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).							
Signed, sworn to and dated this day of ,							
X (Authorized Representative and Individual	y)	<u>x</u>	(Auth	norized R	epresentative a	nd Individually)	
Agent Name:					Dh	one:	
Address:				Fax:			
City,State, Zip					HCCS Prod No.		

visit us at www.hcc.com/surety for more information