

Thanks For Checking With Us

Anytime you apply for a bond of this type, bonding companies typically require an application like this to review for approval and to obtain the lowest rate possible. Approval is determined by credit rating and other information disclosed on your application or asked for by the surety company. Please answer all questions and fax it to us without this page. We'll let you know the results as fast as possible. If you have any questions please give us a call.

TO EXPEDITE YOUR APPLICATION PROCESS PLEASE FOLLOW THIS CHECKLIST

- Did you enter your business name correctly to avoid delays? Must show DBA, LLC, Inc., etc.
- Did you enter the desired effective date of this bond?
- Did you use black ink for faxing?
- Did you complete the financial statement section ?
- Did you answer all questions on the application?
- Make certain we have your phone and fax number to contact you if necessary.
- Is the application signed ?
- Did you enter your social security number ?

PLEASE ADD THE FOLLOWING INFORMATION:
Average number of students
Amount of tuition
Length of course
Copy of any agreements the students sign
Business financial statement



Bond applications are processed same day if we receive them by noon. Sometimes additional information is required that could delay results. If this is necessary we will contact you.

Please fax your application to us for approval. We'll contact you when a decision has been made.

Feel free to call us for any questions at:

Phone (800) 331-5453 or (315) 437- 4283 Fax (315) 437-4508

www.bondsexpress.com E-mail: info@bondsexpress.com

If you wish to have the bond mailed priority or overnight, please let us know
(Ask us about overnight mail. We can also ship using your FEDEX or Airborne number)

Please make checks payable to: "RALF RIGO AGENCY" or "BONDSEXPRESS"

P.S. Thank you for taking an interest in our surety bond program. Our experienced staff will do their best to make your experience with us a pleasant one. Also please keep in mind that we offer surety bonds for many different needs in many states. Please feel free to check our web site: www.bondsexpress.com occasionally for new services.

Sincerely,

Ralf Rigo

BONDSEXPRESS.COM


Ralf Rigo Agency
1937 Teall Ave.

Syracuse, NY 13206





PH: (800) 331-5453 (315) 437 4283

Fax: (315) 437-4508

THIS APPLICATION MAY BE COMPLETED ONLINE, PRINTED AND FAXED TO US

Name must be exactly as it should be on bond. 				
SOLE PROPRIETOR		CORPORATION	PARTNERSHIP	LLC
BUSINESS ADDRESS				
BUSINESS PHONE ()		Fax ()		
CITY	County	ST	ZIP	
Name:	Title:	Spouse's name:	Prior Bond Co.	
Corp tax ID if any	Date Business Started	Year of experience in this field		
Soc. Sec. No.	D.O.B. / /	Spouse's Soc. Sec. No.		
HOME ADDRESS		Home phone		
CITY	COUNTY	ST	ZIP	
Real Estate Owned Values	Mortgage \$ Owed	Value of Securities owned		

Has applicant ever; (a) had an application for a bond declined; (b) compromised with creditors; (c) defaulted on a contract; (d) defaulted on a contract forcing a Surety to suffer a loss; (e) experienced a bankruptcy; (f) been in receivership or been liened by a taxing authority? Yes No (If yes to any of the above, attach a full explanation.)

BOND REQUIRED 				
Type of bond:				
Amount: 	Effective Date: 			
To be filed with (Obligee) 				
Address:	CITY	ST	ZIP	
PLEASE ENCLOSE ANY ADDITIONAL PERTINENT INFORMATION (I.E. BOND FORMS, APPLICABLE STATUTES AND PERMITS, COURT JUDGMENTS, ETC.)				
NAME:		SPOUSE'S NAME:		
Soc. Sec. No.		Spouse's Soc. Sec. No.		
Home Address:		Phone: ()		
CITY		ST	ZIP	
PLEASE PRINT ADDITIONAL COPIES OF THIS FORM IF MORE THAN 3 OWNERS				
NAME:		SPOUSE'S NAME:		
Soc. Sec. No.		Spouse's Soc. Sec. No.		
Home Address:		Phone: ()		
CITY		ST	ZIP	
BUSINESS INFORMATION				
DATE BUSINESS ESTABLISHED:				
NAME & BRANCH OF BANK:		Bank Reference:		
Account No:	Bank Balance:	Line of Credit \$		
Number of years experience in this field _____				

I understand that by submitting this application I give permission to obtain a credit report for the individuals listed.

X

Print Your Name Here

X

Sign Your Name here

(WHAT YOU OWN)

Cash on hand and in banks \$ _____
Gov.. securities - (see schedule A) \$ _____
Listed securities - (see schedule A) \$ _____
Unlisted securities - (see schedule A) \$ _____
Loans receivable \$ _____
Real estate mortgages receivable -
Secured by Real Estate Mortgages,
Deeds of Trust - (see schedule B) \$ _____
Real estate owned - (see schedule C) \$ _____

Automobiles and other personal property \$ _____
Cash value -life insurance -(see schedule D) \$ _____

Other assets - itemize \$ _____

TOTAL ASSETS \$ _____

Sources of Income

Salary \$ _____
Bonus & commissions \$ _____
Dividends \$ _____
Real estate income \$ _____
Other income - itemize \$ _____

TOTAL \$ _____

Contingent Liabilities

As endorser, co-maker or guarantor \$ _____
Other special debt \$ _____
On leases or contracts \$ _____
Legal claims \$ _____
Amount of contested income tax liens \$ _____

(WHAT YOU OWE)

Notes payable to banks (secured) \$ _____

Notes payable to banks (unsecured) \$ _____

Notes payable to others (secured) \$ _____

Notes payable to others (unsecured) \$ _____

Accounts and bills due \$ _____

Unpaid income tax \$ _____

Other unpaid taxes & interest \$ _____

Real estate mortgages payable
(See schedule) \$ _____

Chattel mortgages & other liens payable \$ _____

Other debts - itemize \$ _____

TOTAL LIABILITIES \$ _____

NET WORTH \$ _____

TOTAL LIABILITIES & NET WORTH \$ _____

Personal Information

Are you an owner, a partner or officer in any other venture?

Yes No If yes, explain:

Are you an owner, defendant in any suits or legal actions?

Yes No If yes, explain:

Have you during the 15 year period immediately preceding the date of this application, been adjudged a debtor in bankruptcy or reorganized personally or professionally due to insolvency?

Yes No If yes, when and explain: _____

Government Stock and Bonds, Listed and Unlisted Securities Owned

SCHEDULE (A)

No. of Shares or Face Value (bonds)	Description	In Name of	Market Value

Real Estate Mortgages Receivable secured by Real Estate Mortgages, Deeds of Trust

SCHEDULE (B)

Description of Property Covered	Date Acquired	Title in Name of	Amount	Maturity

Real Estate Owned

SCHEDULE (C)

Description of Property and Improvements	Date Acquired	Title in Name of	Cost	Market Value	Mortgage Amount	Mortgage Maturity

Life Insurance including Group Insurance

SCHEDULE (D)

Amount	Name of Company	Beneficiary	Cash Surrender Value	Loans

Assets Pledged or Encumbered by Lien or Security Interest

SCHEDULE (E)

Description	Value	To Whom Pledged

SIGNATURE	DATE SIGNED

BondsExpress.com

Ralf Rigo Agency
 1937 TeallAve.
 Syracuse, NY 13206

Phone (800)-331-5453 or (315) 437-4283
 Fax: (315) 437-4508
 Email: info@bondsexpress.com
www.bondsexpress.com

AGREEMENT OF INDEMNITY

The undersigned and each of them hereby certify that the statements contained herein are true, and are made to induce SURETY (herein called Surety) to execute or continue the suretyship described herein and authorize SURETY to confirm bank balances and all other items which appear in said statement In consideration of the execution by SURETY of the suretyship herein applied for. I (we) agree:

- 1. To pay to SURETY upon demand:
(a) All loss and expense, including attorneys' fees, for which SURETY shall become liable by reason of such suretyship, whether or not SURETY shall have paid such loss and expense at the time of demand:
(b) The annual premium for such suretyship until satisfactory evidence of termination of liability shall be furnished to SURETY
(c) All attorneys' fees and costs incurred by SURETY in enforcing this agreement
(d) An amount sufficient to discharge any claim against SURETY by reason of such suretyship. This sum may be used to pay such claim of be held by SURETY as collateral security against loss.
2. SURETY shall have the exclusive right to determine whether any claim or suit shall, on the basis of liability, expediency or otherwise, be paid, compromised, defended or appealed.
3. An itemized statement of loss and expense incurred by SURETY, sworn to by an officer of SURETY, shall be prima facie evidence of the fact and extent of my (our) obligation to SURETY.
4. SURETY may procure its release from said suretyship under any law for release of sureties without liability to me for any damage I sustain therefrom.
5. That this agreement shall apply to all renewals, continuations, substitutions and extensions of the suretyship herein applied for.
6. That if this suretyship is given in connection with lost instruments or securities, and such lost instruments come into my possession at any time, I will, at my own cost and expense deliver or cause such said securities to be delivered to SURETY.
7. A representative of SURETY may at any time examine any assets held in trust under this suretyship, and SURETY may, at its option, exercise joint control or joint custody with me over such assets.
8. That if said suretyship is cancelable this agreement may be terminated, upon written application to SURETY, only by written notice from SURETY stating when such termination will take effect
9. A photocopy or facsimile of the signatures will be as binding as original signatures.
10. All premiums are fully earned upon issuance of 1st year & renewals, unless prohibited by law, "or is contrary to Surety's filed rates."
11. At the Company's option, monies due or to become due the undersigned from any company, to include, American Contractors Indemnity Company, Capitol Indemnity Corporation, Old Republic International General Insurance Group, Platte River Insurance Company or any other Surety Company, through insurance proceeds or bonding payments may be utilized to pay or help pay obligations incurred under this agreement as an offset.
12. "Fair Credit Reporting Act Notice" This notice is given to comply with the Federal fair Credit Reporting Act (Public law 91-508) and any similar state law which is applicable. As part of our underwriting procedure, a routine inquiry may be made which will provide information concerning character, general reputation, personal characteristics and mode of living. Upon request, additional information as to the nature and scope of the report, if one is made, will be provided.

Signed and dated this ___ day of _____ A.D. 20 ___
SIGNATURE OF APPLICANT FOR BOND

If sole proprietorship, owner should sign; if partnership, all partners must sign; if corporation, president must sign, with signature attested by corporate secretary under corporate seal; all individual applicants should sign.

Witness Sign Here

FIRM NAME

Owner sign here

SIGNATURE

X _____
Attest Corp Sig

X _____
PRINT NAME & TITLE

in consideration of the execution by SURETY of the bond herein applied for, the undersigned, jointly and severally, join in the foregoing indemnity agreement

SIGNATURE OF PERSONAL INDEMNITORS

#1 Owner sign here ALSO

PRINT NAME OR NAMES

#2 owner sign here

PRINT NAME OR NAMES

X _____
INDEMNITORS SIGNATURE

X _____
INDEMNITORS SIGNATURE

X _____
SPOUSE'S SIGNATURE

#2 OWNER SPOUSE MUST SIGN HERE

X _____
SPOUSE'S SIGNATURE

#1 SPOUSE MUST SIGN HERE



PLEASE SIGN IN BOTH PLACES ONCE FOR THE FIRM AND ONCE AS INDIVIDUAL INDEMNITOR (USE BLUE PEN)

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR BONDS CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.