

NYC SECOND HAND DEALER GENERAL BOND

YOUR BUSINESS NAME AS IT SHOULD APPEAR ON BOND _____

OWNER OF BUSINESS NAME _____

BUSINESS ADDRESS _____ CITY _____

STATE NY ZIP _____ Email _____

PHONE NUMBER _____ FAX NUMBER _____

EFFECTIVE DATE FOR A "NEW BUSINESS" BOND ___/___/___

RENEWAL DATE FOR an "EXISTING BUSINESS" BOND: 07/31/200___

**\$1,000 BOND
2 YEAR BOND = \$75**

CREDIT CARD PAYMENTS FOR
RALF RIGO AGENCY/ BONDSEXRESS
1937 TEALL AVE., SYRACUSE, NY 13206
PH# (800) 331-5453 (315) 437-4283 FAX#: (315) 4374508

VISA [] Master Card []

Credit Card# _____ Exp Date ___/___/___

Name on Card: _____

Name of Your Business: _____

Phone: _____ Signed: _____

Amount For Bond: \$ _____
Amount For Priority Mail \$ _____
Amount For Overnight: \$ _____
(Priority Mail add \$8.00. Overnight add \$25.00)