## UTILITY SERVICE PAYMENT BOND

Bond No.\_\_\_\_

KNOW ALL MEN BY THESE PRESEN	TS, THAT WE	
	, (hereinafter called 1	Principal) as Principal and
undertaking required or auth Surety) as Surety, are held CO-OP, INC. (hereinafter cal lawful money of the United S to be make, we hereby bind o	of the laws of the State making, guaranteeing or lorized by the laws of the and firmly bound unto the led Obligee) in the just tate of America, for the urselves and each of our	becoming sole surety upon bonds of e State of Arizona (hereinafter call e SULPHUR SPRINGS VALLEY ELECTRIC
shall pay or cause to be pai	d to SULPHUR SPRINGS VAL	reas, the above bounded Principals LEY ELECTRIC CO-OP, INC., Willcox, plied at its place of business
(Street Address)	(City)	(State)
then this obligation shall b	e void: otherwise to rema	ain in full force and effect.
Obligee to bring an action o action has accured. Failure discharge Surety from liabil	n the contract against a on the part of the Obliga ity on the instant agree t specifically mentioned	equire, by notice in writing, the Principal when such right of ee to bring such action does not ment. Surety further waives any herein which might accrue as a
		sole and exclusive 'discretion' to be in default on its payment
Principal, upon thirty (30) INC. It is understood that i for and shall pay or cause t	days written notice to S n the event of such cance o be paid to SULPHUR SPR ty services supplied at	uding default on the part of the ULPHUR SPRINGS VALLEY ELECTRIC CO-OF ellation, Surety remains responsible INGS VALLEY ELECTRIC CO-OF, INC., the above referred to place of busin bond.
In witness thereof, said Pri signed and sealed the		ave caused these presents to be duly
	Ву:	(Principal)
	Ву:	
	(Name	) (Title)
Countersigned:		
BY:		
(Resident Agent)		
By:(Name)		
	(Title)	(Surety)
	Ву:	-
	(Name)	(Title)

## INTEGRITY SURETY BOND APPLICATION

			AGENCY CONTACT			
AGENCY PHONE:	AGENCY F	FAX:	E-MAIL:			
AGENCY ADDRESS:						
CURRENT OR EXPIRING QUOTE WE ARE	LOOVING TO PEAT?	,	(City)	(State)	(Zip)	
		-				
NAME OF PREVIOUS SURETY COMPANY	WRITING THE BONL	)?				
SECTION I: BOND APPLIED FOR: TYPE OF BOND:		EFF.DATE:	EXP.DA	ΓE:		
TYPE OF COMPANY CORP LLC	DBA  PARTNER					
OBLIGEE:						
OBLIGEE ADDRESS: (Street)		(City)	(State)		(7in)	
SECTION II: GENERAL INFORMATION		,	(State)		(Zip)	
APPLICANT'S NAME:		SPOUSE NAME				
SS#:SPO	USE SS#	HOI	ME PHONE:			
RESIDENTIAL ADDRESS:(Street)		(City)	(8: 1.)		(3: )	
BUSINESS NAME:		(City)	(State)		(Zip)	
BUSINESS PHONE:	BUSINESS FAX:		Client E-mail			
BUSINESS ADDRESS: (Street)		(City)	(State)		(Zip)	
DATE BUSINESS BEGAN UNDER CURRENT	NAME:		BUSINESS TAX ID:			
HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE?		O YOU HAVE ANY LIE GAINST YOU?	NS, CLAIMS, OR JUDG	EMENTS	YES NO	
HAS APPLICANT EVER FAILED IN BUSINES	SS? YES 🗌 NO 🗍 H	IAS APPLICANT EVER	FILED BANKRUPTCY?	,	YES   NO	
					,	
IF YES TO ANY. I	PLEASE EXPLAIN ON A	A SEPERATE SHEET C				
·		A SEPERATE SHEET C				
SECTION III: ADDITIONAL OWNERS / PART	NERS	A SEPERATE SHEET O				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#:SPOI	NERS	SPOUSE NAME	OF PAPER:			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME	OF PAPER:		(Zip)	
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM	NERS	SPOUSE NAME HO!	ME PHONE:  (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SPOI  RESIDENTIAL ADDRESS: (Street)  STATEM ASSETS	NERS  USE SS#  MENT OF ASSETS & I	SPOUSE NAME HON (City)  LIABILITIES AS OF LIABILITIES	ME PHONE:  (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SPOI  RESIDENTIAL ADDRESS:  (Street)  STATEM  ASSETS  CASH IN BANK	NERS  USE SS#  MENT OF ASSETS & I	SPOUSE NAME HO!  (City)  LIABILITIES AS OF  LIABILITIES  NOTES PAYABLE T	ME PHONE:  (State)  O BANKS	\$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SS#:  RESIDENTIAL ADDRESS:  (Street)  STATEM  ASSETS  CASH IN BANK  CASH ON HAND	NERS  USE SS#  MENT OF ASSETS & I	City)  LIABILITIES AS OF LIABILITIES NOTES PAYABLE T	ME PHONE:  (State)  GO BANKS O OTHERS	\$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SS#:  SPOI  RESIDENTIAL ADDRESS:  (Street)  STATEM  ASSETS  CASH IN BANK  CASH ON HAND  STOCKS & BONDS	NERS  USE SS#  MENT OF ASSETS & I  \$ \$ \$	CCity)  LIABILITIES AS OF LIABILITIES  NOTES PAYABLE T  NOTES PAYABLE T  ACCOUNTS PAYAB	ME PHONE:  (State)  O BANKS O OTHERS	\$ \$ \$		
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SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SS#:  SPOI  RESIDENTIAL ADDRESS:  (Street)  STATEM  ASSETS  CASH IN BANK  CASH ON HAND  STOCKS & BONDS  ACCOUNTS RECEIVABLE  NOTES RECEIVABLE	NERS  USE SS#  MENT OF ASSETS & I  \$ \$ \$ \$ \$	City)  LIABILITIES AS OF LIABILITIES  NOTES PAYABLE T  NOTES PAYABLE T  ACCOUNTS PAYAB  FEDERAL & STATE  ALL OTHER TAXES	ME PHONE:  (State)  O BANKS O OTHERS  LE INCOME TAX DUE	\$ \$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SS#:  SPOI  RESIDENTIAL ADDRESS:  (Street)  STATEM  ASSETS  CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY	NERS  USE SS#  MENT OF ASSETS & I  \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME  (City)  LIABILITIES AS OF LIABILITIES  NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO	ME PHONE:  (State)  O BANKS O OTHERS LE INCOME TAX DUE	\$ \$ \$ \$ \$		
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SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:  SS#: SPOI  RESIDENTIAL ADDRESS: (Street)  STATEM  ASSETS  CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY CASH VALUE OF LIFE INSURANCE EQUIPMENT REAL ESTATE	NERS  USE SS#  MENT OF ASSETS & I  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME  (City)  LIABILITIES AS OF LIABILITIES  NOTES PAYABLE T ACCOUNTS PAYAB  FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO DUE ON EQUIPMEN DUE ON REAL ESTA	ME PHONE:  (State)  O BANKS O OTHERS LE INCOME TAX DUE  DLLS, ETC. NT ATE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
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Completion of this form constitutes permission to obtain consumer information which will be used to determine bonding eligibility This information will be held in the strictest confidence no premium financing will be accepted as premium is earned in full.

Integrity Bonds Inc Toll Free: (866) 420-2613

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E-Mail info@integritybonds.com