

SOUTHERN CALIFORNIA EDISON COMPANY
300 N Lone Hill Avenue
San Dimas, CA 91773

SURETY BOND

Bond No. _____
Amount _____

Effective Date _____
Premium _____

We, _____ (“Principal”) and _____ (“Surety”), a corporation incorporated under the laws of the State of _____ and duly authorized to engage in the Surety Insurance business in the State of California, are held and firmly bound unto Southern California Edison Company (“Edison”), in the sum of _____ dollars (\$ _____), lawful money of the United States of America. Until the payment of said sum is made, we bind Ourselves, our successors and assigns, jointly and severally to Edison.

Surety agrees to pay to Edison upon demand all charges for any goods or services provided by Edison, not to exceed the amount stated above, which have been or will be incurred by Principal.

Principal plans to use, is using, or has used, goods or services provided by Edison. Principal is required to issue payment to Edison for said goods or services provided by Edison and furnishes this Bond in lieu of a cash deposit otherwise required by Edison.

THE CONDITIONS OF THIS BOND ARE:

1. The condition of obligation is such that this Bond will be unenforceable against Surety if Principal shall pay or cause to be paid to Edison all charges for any goods or services provided by Edison rendered at any and all times to Principal. Surety also agrees to fully reimburse and repay any and all costs, damages and reasonable expenses which Edison may suffer because of the failure of Principal or Surety to perform all of the obligations of Principal or Surety under this agreement.
2. Surety must have a rating from AM Best Company of A or better.
3. **Default:** In the event, however, the Principal fails to render payment in full to Edison in a timely manner for any goods or services provided by Edison or charges or files a petition in bankruptcy, this shall constitute a default of Principal. In the event of such default, the amount due and owing, up to the full value of this Bond, will be paid by Surety to Edison. Such payment shall be made to Edison within thirty (30) days of receipt of notice from Edison of default of Principal. Interest on the amount due shall accrue at the rate of 18% per annum on the thirty-first (31st) day after receipt of notice from Edison.
4. **Cancellation:** Either party may cancel this Bond by written notice served by certified or registered mail or return receipt requested to the other party, specifying the effective date of said cancellation, which in no event shall be less than thirty (30) days after the postmarked date which said notice was mailed. Notice to Edison should be mailed to the above address.
5. **California Law:** This agreement shall be governed by and construed in accordance with the laws of the State of California.

IN WITNESS THEREOF, the parties hereto have caused this Bond to be executed on their behalf by their respectively Authorized officers of agents this _____ day of _____, 20_____.

Seal of
Principal

Principal: _____

By: _____

Address: _____

Surety: _____

Seal of
Surety

By: _____

Address: _____

(Individual and Partnership)

(Corporation)

STATE OF CALIFORNIA
COUNTY OF

STATE OF CALIFORNIA
COUNTY OF

_____ SS
On _____ before me,
(Date)
_____, personally
(Notary)
appeared _____ and
(Signatory)
_____, personally
(Signatory)

_____ SS
On _____ before me,
(Date)
_____, personally
(Notary)
appeared _____ and
(Signatory)
_____, personally
(Signatory)

known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

known to me to be the President, and known to me to be the Secretary of the Corporation that executed the within instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Witness my hand and official seal.

Signature

Signature

(Seal)

(Seal)

THIS SECTION MUST ALWAYS BE COMPLETED
(Attorney in Fact)

STATE OF ARIZONA
COUNTY OF

_____ ss.

On _____ before me, _____, personally
(Date) (Notary)
appeared _____ and _____, personally
(Signatory) (Signatory)

known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument as the Attorney(s) in fact of _____ and _____, an acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity(ies) upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Signature _____ (Seal)

INTEGRITY 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: _____ EFF.DATE: _____ EXP.DATE: _____
 TYPE OF COMPANY CORP LLC DBA PARTNERSHIP AMOUNT: _____
 OBLIGEE: _____

OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)

SECTION II: GENERAL INFORMATION

APPLICANT'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

BUSINESS NAME: _____

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? YES NO DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS AGAINST YOU? YES NO

HAS APPLICANT EVER FAILED IN BUSINESS? YES NO HAS APPLICANT EVER FILED BANKRUPTCY? YES NO

IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:

SECTION III: ADDITIONAL OWNERS / PARTNERS

APPLICANT'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

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 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

Local (480) 626-8916

E-Mail info@integritybonds.com

Fax: (602) 674-8235