

Surety Bond

KNOW ALL MEN BY THESE PRESENTS, That we, _____

an _____ with its principal place of business at _____, as Principal, and _____, _____, _____, _____, a corporation duly authorized by law to become surety on bonds in the State of Connecticut as Surety, are held and firmly bound unto The Connecticut Light & Power Company, 107 Seldon St., Berlin, CT 06037 in the sum of \$ _____ lawful money of the United States, to be paid to The Connecticut Light & Power Company for which payment well and truly to be made, the Principal binds itself, its successors and assigns, and _____ binds itself, its successors and assigns, jointly, and severally, firmly by these presents.

WHEREAS, The Connecticut Light & Power Company is providing utility service to the Principal and the Principal has agreed to pay for all such utility service in accordance with the rules and regulations of The Connecticut Light & Power Company and the rules and regulations of the Connecticut Department of Utility Control in effect from time to time:

NOW, THEREFORE, the condition of this Surety Bond is such, that if the Principal shall pay all utility bills in accordance with the rules and regulations of The Connecticut Light & Power Company and the regulations of the Connecticut Department of Utility Controls in effect from time to time, then this surety bond shall be null and void, otherwise to remain in full force and effect:

The Surety agrees that it will pay The Connecticut Light & Power Company for all unpaid utility bills of the Principal, upon written demand of The Connecticut Light & Power Company to the Surety setting forth the amount due from the Principal for said utility service. Liability under this bond, shall be limited to the amount set forth above and shall include only bills incurred by the Principal for utility provided on or before _____.

IN WITNESS WHEREOF, _____ and _____ have caused this instrument to be signed by their duly authorized representatives, and their corporate seals to be hereunto affixed. Signed this _____ day of _____.

WITNESSES:
As to principal

Customer of Record

BY _____
Its Duly Authorized

SURETY COMPANY

As to Surety

names must be typed under

BY _____
Attorney-in-fact

signatures

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