

**SURETY BOND**

**BOND NUMBER** \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS: That are \_\_\_\_\_

as Principal, and the \_\_\_\_\_

\_\_\_\_\_, Authorized to do business in the State of Florida, as Surety are held and firmly bound unto the CITY OF TALLAHASSEE, FLORIDA, in the full and just sum of \_\_\_\_\_ DOLLARS, lawful money of the United States of America, to the payment of which the said Principal and said Surety, their executors, administrators, heirs, successors, and assigns, are jointly and severally, firmly bound by these presents.

WHEREAS, under the requirements and regulations of the City of Tallahassee in the operations of its utility plants and in the furnishing of utility service to current subscribers, the said City of Tallahassee requires that all users and subscribers of City utilities deposit in cash, or in lieu thereof, a surety bond in an amount to be fixed by the City of Tallahassee to the Obligee herein, and

WHEREAS, the \_\_\_\_\_

Has been required to make such deposit or furnish such bond in the amount of \_\_\_\_\_ Dollars.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH. That if the said \_\_\_\_\_ shall well and faithfully perform the obligations herein recited and shall promptly pay all bills rendered by the City of Tallahassee to Obligee for utility services as provided by this bond and the ordinances, rules, and regulations of the City of Tallahassee, then the above bond to null and void, otherwise to remain in full force and effect.

THIS BOND IS ISSUED AND EXECUTED SUBJECT TO THE FOLLOWING CONDITIONS.

1. That the term of this bond shall be indefinite.
2. That the Surety Company reserves the right to cancel the bond by giving thirty (30) days notice to the City of Tallahassee and upon receipt of such cancellation notice the Surety is discharged and relieved of any further liability, it being understood and agreed, however, that the said Principal and the said Surety will be liable for any loss accruing up to the effective date of said cancellation notice, in no event, however, in excess of the penalty of this bond.

SIGNED, SEALED AND DATED THIS THE \_\_\_\_\_ Day of \_\_\_\_\_ A.D., 20 \_\_\_\_\_

\_\_\_\_\_  
(Print Principal Name)

\_\_\_\_\_  
Principal Signature

ATTEST:  
\_\_\_\_\_

By \_\_\_\_\_  
\_\_\_\_\_  
Surety

Phone Number: \_\_\_\_\_

By \_\_\_\_\_  
Attorney-in Fact

# 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	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>NAME OF OWNERS</b>		<b>NAME &amp; TITLE OF OFFICERS</b>	<b>PERCENTAGE OF OWNERSHIP</b>

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](mailto:info@integritybonds.com)**

**Fax: (602) 674-8235**