

10. NOTARIAL BOND

Bond No. _____

KNOW ALL BY THESE PRESENTS, that we _____ as principal
(Name of Applicant)
(applicant) and _____ of
(Name of Surety and _____ County as
Street address, city, state & ZIP code

freehold or corporate surety, are held and firmly bound unto the State of Indiana, in the penal sum of _____ (\$)
), the payment of which, well and truly
to be made, we bind ourselves, our heirs, executors and administrators, firmly by these presents.

WITNESS our signatures as acknowledged below. THE CONDITION OF THE ABOVE OBLIGATION IS AS FOLLOWS, TO-WIT.

WHEREAS, the above bound principal has applied for appointment by the Governor of the State of Indiana as a Notary Public, in and for the State of Indiana,
for an eight-year term.

Now, if the said principal shall truly and faithfully perform and discharge the duties of said office of Notary Public, in all things according to law, then the above obligation to
be null and void, otherwise to remain in full force and virtue in law. The term of this bond is from the effective date of the principal's commission to the expiration date of the same.

Signature of applicant. Must be acknowledged below in #11

Signature of surety. Must be acknowledged below in #12

11. ACKNOWLEDGEMENT OF APPLICANT'S SIGNATURE BY A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED BY LAW TO TAKE
ACKNOWLEDGEMENTS.

STATE OF _____, COUNTY OF _____ :SS:
County in which acknowledgement is being made

Before me the undersigned, an officer authorized to take the acknowledgement of deeds (Notary Public, County Clerk, etc.) personally appeared

and acknowledged the execution of the foregoing bond for the uses and
Printed or typed name of applicant
purposes therein expressed, without condition or reservation.

Place Officer's seal here IN TESTIMONY WHEREOF, I _____, have hereunto set my
Printed or typed name of officer
hand and official seal, this _____ day of _____, 20_____.

Signature of authorized officer, a _____ office
for the County of _____, State of _____
Officer's county of residence

My commission expires: _____.

12. ACKNOWLEDGEMENT OF SURETY'S SIGNATURE (Freehold or Corporate) BY A NOTARY PUBLIC OR OTHER OFFICER
AUTHORIZED BY LAW TO TAKE ACKNOWLEDGEMENTS. (NOTE: The officer can not acknowledge his/her own signature)

STATE OF _____, COUNTY OF _____ :SS:
County in which acknowledgement is being made

Before me the undersigned, an officer authorized to take the acknowledgement of deeds (Notary Public, County Clerk, etc.) personally appeared

and acknowledged the execution of the foregoing bond for the uses and
Printed or typed name of individual's signing as surety
purposes therein expressed, without condition or reservation.

Place Officer's seal here IN TESTIMONY WHEREOF, I _____, have hereunto set my
Printed or typed name of officer
hand and official seal, this _____ day of _____, 20_____.

Signature of authorized officer, a _____ office
for the County of _____, State of _____
Officer's county of residence

My commission expires: _____.

13. SUPPORTING AFFIDAVIT TO BE USED IN SUPPORT OF A FREEHOLD SURETY.

STATE OF INDIANA, COUNTY OF _____ :SS:
County in which acknowledgement is being made

The undersigned surety, being duly sworn or affirmed, says that he/she is the owner in fee-simple of Real Estate in _____ County, of the fair Cash Value of \$_____
over and above all encumbrances and exemptions.

Signature of surety
Place Officer's seal here IN TESTIMONY WHEREOF, I _____, have hereunto set my

Printed or typed name of officer
hand and official seal, this _____ day of _____, 20_____.

Signature of authorized officer, a _____ office
for the County of _____, State of _____
Officer's county of residence

My commission expires: _____.

For the statute pertaining to surety company bonds, see Indiana Code 27-1-22. For the statutes pertaining to Officer's Bonds and Oaths, see Indiana Code 5-4.
S-6542 (2/04)

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

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