

SURETY BOND

MISSISSIPPI MORTGAGE CONSUMER PROTECTION ACT

STATE OF MISSISSIPPI

BOND NUMBER _____

KNOW ALL MEN BY THESE PRESENTS, That I/we _____, as **PRINCIPAL**, and _____, a Company organized and existing under the laws of _____ with its principal place of business located at _____ and duly licensed to do business in the State of Mississippi as **SURETY**. are held and firmly bound unto the State of Mississippi for the sum of \$_____, for the payment of which, well and truly to be made and done, we bind ourselves, our heirs, executors, successors, administrators, and assigns, jointly and severally by these presents for each licensed office.

WHEREAS, said Principal, as required by the Mississippi Mortgage Consumer Protection Law, Mississippi Code 1972, Annotated, Section 81-18-1 et seq., has made application to the Commissioner of the Department of Banking and Consumer Finance of the State of Mississippi for a license to engage in the mortgage business as authorized by said Act, at a place of business located at:

(Street Address)

(City) (County) (State)

and is required by said Act to furnish this bond. Any additions or deletions in number and/or amount are to be furnished in a rider from the Surety.

NOW THEREFORE, THE CONDITION OF THE OBLIGATION IS SUCH, that if the said Principal for the period from _____ to September 30, _____ shall well and truly operate its business in conformity with, and shall abide by, the laws of this State regulating the mortgage industry, and all other applicable statutes of the State of Mississippi, and shall faithfully perform the duties and obligations pertaining to the business so licensed and the prompt payment of any judgment which may be recovered against such Principal on account of damages or other charges arising directly or collectively from any violation of the provisions of the Mississippi Mortgage Consumer Protection Law, and shall pay and discharge any and all indebtedness for which such Principal may become liable under the provisions of the Mississippi Mortgage Consumer Protection Law and any other applicable laws, statutes, or ordinances of the State of Mississippi, or of any county, municipality or other political subdivision thereof, this obligation shall be void; otherwise this obligation shall remain in full force and effect.

(over)

PROVIDED FURTHER, that this obligation may be continued for any subsequent calendar year by a continuation certificate duly signed and sealed by the Principal and Surety, with any changes in number and amount to be made by the Surety and acknowledged by the Principal.

IN WITNESS WHEREOF, the Principal and Surety have executed this bond on this the _____ day of _____, 20_____.

PRINCIPAL: _____

By: _____

STATE OF _____
COUNTY OF _____

Before me, the undersigned authority, a Notary Public, duly commissioned and qualified in and for the County of _____, State of _____, on this _____ day of _____, 20_____, personally appeared _____ well known to me to be the person who executed the above and foregoing bond as **PRINCIPAL**, thereon, on the date said instrument bears, and for the purpose and consideration therein expressed.

IN WITNESS THEREOF, I have hereunto affixed my hand and seal on the day and date first above written.

(Notary Seal)

_____, Notary Public

My Commission Expires _____

SURETY: _____

By: _____

Attorney in Fact

STATE OF _____
COUNTY OF _____

Before me, the undersigned authority, a Notary Public, duly commissioned and qualified in and for the County of _____, State of _____, on this _____ day of _____, 20_____, personally appeared _____ well known to me to be the person who executed the above and foregoing bond as **SURETY**, thereon, on the date said instrument bears, and for the purpose and consideration therein expressed.

IN WITNESS THEREOF, I have hereunto affixed my hand and seal on the day and date first above written.

(Notary Seal)

_____, Notary Public

My Commission Expires _____

This bond is hereby approved,

BY: _____

Commissioner
Department of Banking and Consumer Finance

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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