

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

**INDEMNITY BOND FOR ELECTRIC SERVICE  
FURNISHED BY MISSISSIPPI POWER COMPANY**

KNOW ALL MEN BY THESE PRESENTS, THAT \_\_\_\_\_

\_\_\_\_\_

as principal, and \_\_\_\_\_

a corporation organized and existing under the laws of the State of \_\_\_\_\_

and duly authorized to conduct and carry on a general surety business in the State of Mississippi, as surety, are each held and firmly bound unto the Mississippi Power Company, as obligee, in the full and just sum of Dollars (\$ \_\_\_\_\_) lawful money of the United States of America, for the payment whereof well and truly to be made the said principal and the said surety hereby bind themselves, their respective heirs, legal representatives, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the principal has applied to Mississippi Power Company for electric service and

WHEREAS, under the Electric Service Rules and Regulations of the obligee, it is necessary for the principal to furnish security for the prompt payment of electric bills for electric service furnished and supplied the principal by the obligee and

WHEREAS, the principal desires to post his bond in lieu of a cash deposit as security for the payment of electric bills and other obligations under contract.

NOW THEREFORE, the condition of this obligation is such that if the said principal shall well and faithfully perform the obligations herein recited and SHALL PROMPTLY PAY ALL BILLS RENDERED BY THE OBLIGEE TO SAID PRINCIPAL FOR ALTERNATIVELY: (PLEASE INITIAL APPROPRIATE CATEGORY AS PROVIDED)

\_\_\_ 1. ALL OF THE PRINCIPAL'S ELECTRIC SERVICE ACCOUNTS

OR

\_\_\_ 2. ONLY THE ACCOUNTS SERVING THE HEREIN LISTED SERVICE ADDRESSES

and as provided in this bond and the Electric Service Rules and Regulations of the obligee, then the above obligation shall be null and void, otherwise to remain full force and effect, and the surety herein agrees to pay, within thirty (30) days after written demand for payment by the obligee, any delinquent electric bills rendered by the obligee to the principal herein if such bills are not paid by said principal within fifteen (15) days from the date of said bills.

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

1. That the surety company reserves the right to cancel this bond by giving sixty (60) days written notice to the obligee via Certified Return Receipt Mail, to the address of the obligee listed below and on the effective date of such sixty day cancellation notice the surety is discharged and relieved of any liability. It being understood and agreed, however, that the said principal and surety will be liable for any loss accruing up to the effective date of the sixty day cancellation notice date, in no event however, in excess of the penalty of this bond.
2. That it is expressly understood by the principal and surety herein that the obligee may, by giving fifteen (15) days written notice, cancel this bond or require an endorsement hereon increasing the penal amount provided in this bond.
3. This bond shall be effective from and after the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signed, sealed and delivered  
In the presence of:

\_\_\_\_\_  
Witness as to Principal

\_\_\_\_\_  
Name of Principal

\_\_\_\_\_  
Witness as to Surety

By: \_\_\_\_\_  
Name and Title: Print or Type

\_\_\_\_\_  
Officer Signature

\_\_\_\_\_  
Address of Claim Office

Surety  
By: \_\_\_\_\_  
Its Attorney in Fact

-----  
City State, Zip

Obligee: MISSISSIPPI POWER COMPANY  
Attention: J. H. Stuart  
401 West Main Ave  
Lumberton MS 39455  
601-545-4004

\_\_\_\_\_  
Telephone Number of Claim Office

\_\_\_\_\_  
Agent Name

\_\_\_\_\_  
Agent Address

\_\_\_\_\_  
City State, Zip

**CERTIFICATE OF POWER OF ATTORNEY OF SURETY MUST BE ATTACHED**



# 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**

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