

STATE OF OKLAHOMA
USED MOTOR VEHICLE AND PARTS COMMISSION
WHOLESALE MOTOR VEHICLE DEALER'S SURETY BOND

Bond Number _____

KNOW ALL BY THESE PRESENTS, that _____

_____ as Principal, whose place(s) of business is/are located at the address(es) set forth above, and

_____ as Surety, are held and firmly bound to the State of Oklahoma and severally to such persons who shall have any right of action under the conditions of this bond against said Principal in its capacity as a wholesale motor vehicle dealer in the penal sum of **Twenty-Five Thousand Dollars (\$25,000.00)**, for the payment of which sum, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

WHEREAS, the above-named Principal is applying for a license as a wholesale motor vehicle dealer,

AND WHEREAS, said Principal is required by law to submit a good and sufficient surety bond, conditioned as set forth below, with said application for license,

THE CONDITION OF THIS OBLIGATION is such that if the Principal shall conduct its business as a wholesale motor vehicle dealer without practicing fraud or making fraudulent representations, and without violating any of the provisions of the Oklahoma Used Motor Vehicle Dealer Laws (47 O.S. § 581et seq.) or any amendments thereto, and if the Principal shall indemnify and reimburse any person for any loss or damage suffered by reason of said fraud, fraudulent representations or otherwise by the issuance of a certificate of title by the Principal, then this obligation shall be void; otherwise to remain in full force and effect.

IT IS UNDERSTOOD AND AGREED that the above obligation shall inure to the benefit of any person, whether a consumer, used motor vehicle dealer or used motor vehicle auction, but shall not extend to financial institutions or parties extending floor plans or financing for the dealer's inventory.

IT IS FURTHER UNDERSTOOD AND AGREED that the above obligation shall extend, without notification to the Surety, to any change of officers of the Principal if the Principal is a corporation, to any additional locations or changes of address of the Principal or to any substitution of business name of the Principal wherein ownership is not changed.

IT IS FURTHER UNDERSTOOD AND AGREED that the liability of the Surety hereunder shall, in no event, exceed the amount of this bond and that the Surety shall have the right to cancel the bond upon the giving of thirty (30) days written notice of cancellation to the Principal and the Used Motor Vehicle and Parts Commission.

DATED EFFECTIVE this _____ day of _____, _____.

Principal

BY: _____

Surety

BY: _____

47 O.S. § 583(B) All bonds and licenses issued under the provisions of this act shall expire December 31.

WD

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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