

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS, THAT WE, Lottery Retailer Number # \_\_\_\_\_  
Owner Name \_\_\_\_\_  
Corporation Name \_\_\_\_\_  
Business Name (T/A) \_\_\_\_\_  
Business Address \_\_\_\_\_

as Principal, (hereinafter called Principal), and \_\_\_\_\_  
a corporation organized and existing under the laws of the State of \_\_\_\_\_ with its Home Office in  
the City of \_\_\_\_\_ as Surety, (hereinafter called Surety), are held and firmly bound unto

Pennsylvania Department of Revenue  
Pennsylvania Lottery  
1200 Fulling Mill Rd, Middletown, Pa, 17057  
ATTN: Licensing Officer

As Obligee, in the full and just sum of \$ \_\_\_\_\_ Dollars, lawful money of the United States of  
America, to be paid to the Obligee, its successors or assigns on demand for and on account of any  
funds due from the principal as a result of the principal's status as a Pennsylvania State Lottery Ticket  
Retailer to which the principal has failed to make payments to the Obligee for which payment, well and  
truly to be made, we bind ourselves, or heirs, administrators, successors and assigns, jointly  
and severally, firmly by these presents.

"Whereas, the Principal has entered, or is about to enter, into written Agreement with the Obligee to be  
financially responsible to the Pennsylvania State Lottery for all financial obligations derived from the  
Principal's status as a Pennsylvania State Lottery Retailer as is more specifically set forth in said  
Agreement, to which reference is hereby made."

NOW THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH , that if Principal shall  
well and truly perform and carry out the covenant, terms and conditions of said Agreement, then this  
obligation to be void: otherwise to remain in full force and effect. The surety may cancel this bond by  
written notice to the Principal and Obligee, by Certified Mail, at least thirty (30) days in advance of the  
date of cancellation.

Sealed with our seals and dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Witness

Attested to:

By: \_\_\_\_\_

\_\_\_\_\_  
Business Name  
\_\_\_\_\_(SEAL)

\_\_\_\_\_  
Owner Name

By: \_\_\_\_\_(SEAL)

\_\_\_\_\_(SEAL)

\_\_\_\_\_  
Insurance Company

By: \_\_\_\_\_

Attorney-in-Fact

INSURANCE AGENCY ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

Telephone No: \_\_\_\_\_

# 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>TOTAL LIABILITIES</b>	\$
		<b>NET WORTH</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**

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**Toll Free: (866) 420-2613**

**Local (480) 626-8916**

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