

**State of South Dakota
Division of Banking
217 ½ W. Missouri Ave.
Pierre, SD 57501
(605) 773-3421**

MORTGAGE BROKER BOND (SOUTH DAKOTA)

Broker (Licensee)	Surety
Licensee Address	Surety Address
City	City
State	State
Zip	Zip

ADMINISTRATOR: Division of Banking, State of South Dakota

BOND NUMBER: _____

THE ABOVE NAMED BROKER AND SURETY (WHO IS DULY QUALIFIED TO DO BUSINESS IN THE STATE OF SOUTH DAKOTA) ARE HEREBY BOUND IN THE PENAL SUM OF \$25,000 FOR PAYMENT UNDER THE FOLLOWING TERMS AND CONDITIONS:

1. The above-named broker (the Principal) is licensed or has applied to the South Dakota Division of Banking (the Division) for a license to conduct business as a mortgage broker pursuant to SDCL 54-14-12 et. seq.
2. The State of South Dakota or any person(s) suffering loss or damages shall have the right to bring an action on this bond against the Principal or the Surety.
3. This bond is one continuing obligation and in no event shall the liability of the Surety exceed the penal sum of \$25,000 for the aggregate of all claims occurring while this bond is in force.
4. This bond is conditioned on the Principal's compliance with all provisions of SDCL Chapter 54-14 and any rules adopted pursuant to that chapter and the payment of any amounts owed by the Principal to the State of South Dakota or another person.
5. The Surety shall have the right to terminate its obligation under this bond by filing written notice with the Division at least 30 days prior to the effective date of such termination. Obligations of the Surety arising prior to the effective date shall not be affected by the termination.
6. In the event the Surety makes full or partial payment on this bond, said Surety shall immediately give written notice of such payment to the Division.

This bond shall take effect on _____ and shall continue in force until it is terminated or cancelled.

EXECUTED ON this _____ day of _____, 20_____.

Broker
BY _____

NOTE: Persons executing for Surety other than corporate officers must attach Power of Attorney

SURETY _____
BY _____
ADDRESS _____

PHONE # _____

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

Toll Free: (866) 420-2613

Local (480) 626-8916

E-Mail info@integritybonds.com

Fax: (602) 674-8235