



WEST VIRGINIA STATE TAX DEPARTMENT
Revenue Division

COLLECTION AGENCY BOND

KNOW ALL MEN BY THESE PRESENTS:

- (1) That we, (Principal): _____
 - (2) Address: _____
 - (3) As Principal, and (Surety Company): _____
 - (4) Address: _____
- a firm and/or a corporation authorized to do business in the State of West Virginia, as Surety, are held and firmly bound unto the State of West Virginia in the just and full sum of five thousand dollars (\$5,000.00) to the payment whereof well and truly to make, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, the above bound Principal is a collection agency within the meaning of Chapter 47, Article 16, of the Official Code of West Virginia of 1931, as amended, and whereas the Tax Commissioner of the State of West Virginia has required the said Principal to deposit a Bond, in accordance with the provisions of Chapter 47, Article 16, Section 4 of the said Code of West Virginia.

NOW THEREFORE, if said Principal shall in all respects fully comply with the provisions of Chapter 47, Article 16, of the Code of West Virginia, and the rules and regulations adopted and promulgated thereunder, and shall account for any pay damages for which said Principal shall be liable, and shall protect and save harmless the State of West Virginia or a private person from any loss arising from the failure of the Principal to pay such damages, for any cause whatsoever, then this obligation shall be void; otherwise to remain in full force and effect unless any of the signatories hereto give written notice by registered mail to the other signatories hereto that the signatory desiring the cancellation intends to cancel this bond sixty (60) days after the post-mark date of the written registered notice. **Notices of renewal are not required.**

The Principal hereby waives the secrecy provisions of West Virginia Code §11-10-5(d) and authorizes the Tax Department to release to the surety company information necessary to file proof of claim, concerning any tax liability covered by this bond and accruing during the effective dates of this bond.

- (6) This bond shall be effective from the _____ day of _____, _____.

IN WITNESS WHEREOF the said principal has hereunder set his/her or its hand and affixed his/her or its seal, and the said surety has caused its corporate name to be signed hereto and its corporate seal to be hereunto affixed by its duly authorized officer or agent and

- (7) executed this instrument this _____ day of _____, _____.

(8) _____
(Principal)

(9) By: _____
Title: Must be President or Vice-President or authorized individual

- (10) **Affix: Principal Corporate Seal**
(A drawn facsimile is acceptable if no corporate seal)
(LLC's are not required to provide a seal)

(11) (Print Name of Person Signing)

(12) _____
(Surety Company)

- (14) **Affix: Surety Corporate Seal**

(13) By: _____
(Title)

ACKNOWLEDGEMENT BY PRINCIPAL IF INDIVIDUAL OR PARTNERSHIP

(15) State or Commonwealth of _____
(16) County of _____, to-wit:
(17) I, _____ a Notary Public in and for the county and state aforesaid, do hereby certify
that
(18) _____ whose name is signed to the foregoing writing, has this day
acknowledged the same before me in my said county
(19) Given under my hand this the _____ day of _____, _____.
(20) Notary Seal (21) _____
(Notary Public)
(22) My Commission expires on the _____ day of _____, _____.

ACKNOWLEDGEMENT BY PRINCIPAL IF CORPORATION or LIMITED LIABILITY COMPANY

(23) State or Commonwealth of _____
(24) County of _____, to-wit:
(25) I, _____ a Notary Public in and for the county and state aforesaid, do hereby certify that
(26) _____, who as
(27) _____, signed the foregoing writing for
(28) _____, a corporation/LLC,
(29) has this day, in my said county, before me, acknowledged the said writing to be the act and deed of the said corporation.
(30) Given under my hand this the _____ day of _____, _____.
(31) Notary Seal (32) _____
Notary Public
(33) My Commission expires on the _____ day of _____, _____.

ACKNOWLEDGEMENT FOR SURETY (Must be completed by the Surety Company)

(34) State or Commonwealth of _____
(35) County of _____, to-wit:
(36) I, _____ a Notary Public in and for the county and state aforesaid, do hereby certify that
(37) _____, who as
(38) _____, signed the foregoing writing for
(39) _____, a surety company,
(40) has this day, in my said county, before me, acknowledged the said writing to be the act and deed of the said corporation.
(41) Given under my hand this the _____ day of _____, _____.
(42) Notary Seal (43) _____
Notary Public
(44) My Commission expires on the _____ day of _____, _____.

Sufficiency in Form and Manner of Execution Approved Attorney General
Dated this _____ day of _____, _____. By _____
Assistant Attorney General

COLLECTION AGENCY BOND

Should you require any assistance, please contact the West Virginia State Tax Department AT (304) 558-8683.

PREPARATION INSTRUCTION

IF PRINCIPAL IS AN INDIVIDUAL OR PARTNERSHIP:

- Complete the Collection Agency Bond, lines (1) through (10);
- Have a Notary Public complete the applicable section of acknowledgement titled, Acknowledgement by Principal if Individual or Partnership, on the back of bond.

IF PRINCIPAL IS A CORPORATION OR LIMITED LIABILITY COMPANY:

- Complete the bond, lines (1) through (10);
- Have a Notary Public complete the applicable section of acknowledgement titled, Acknowledgement by Principal if Corporation or Limited Liability Company, on the back of bond.
- Affix corporate seal as requested on face of bond; Note: (Line 10) a drawn facsimile is acceptable, if no corporate seal.

SURETY

- Complete the applicable portion of bond;
- Notary Public must complete section of acknowledgement titled, Acknowledgement by Surety (back of bond);
- Attach Power of Attorney to bond if surety signatory is an Attorney In Fact;
- Affix raised Surety Seal to bond and to Power of Attorney.

LINE NUMBER INSTRUCTIONS

FACE OF BOND CANNOT CONTAIN WHITE-OUTS OR ALTERATIONS. REVERSE OF BOND MAY CONTAIN WHITE-OUTS OR ALTERATIONS PROVIDING CHANGES ARE INITIALED BY NOTARY.

- (1-2) Enter name and address of Principal (Specify individual, partnership, corporation or LLC) to be covered by bond.
- (3-4) Enter name and address of Surety Company issuing bond.
- (5) Enter amount of bond.
- (6) Enter effective date of bond.
- (7) Enter execution date of bond.
- (8) Enter name of the Principal (individual, partnership, corporation or LLC) covered by bond.
- (9) If principal is an individual, affix signature. If principal is a corporation, President or Vice-President must sign and print name on bond and underline the appropriate title. **If bond is to be signed by one other than the President or Vice-President, affix a copy of corporate resolutions showing authorization of individual to bind corporation. If Principal is an LLC, Manager or Managing Member must sign and print name and title on bond.**
- (10) **If Principal is a corporation, be sure to affix raised corporate seal; if not available, draw facsimile. Note: LLCs are not required to provide a corporate seal.**
- (11) Enter Name of person signing.
- (12) **Enter name of Surety.**
- (13) Affix signature and title of person having Power of Attorney to bind Surety.
- (14) Affix corporate seal of Surety.

**ACKNOWLEDGEMENT PREPARATION INSTRUCTIONS:
(Acknowledgements must be completed where applicable)**

- If Principal is an Individual or Partnership: A Notary public must complete lines (15) through (22).
- If Principal is a Corporation or Limited Liability Company: A Notary Public must complete lines (23) through (33).
- Surety Company: A Notary Public must complete lines (34) through (44).

ACKNOWLEDGEMENT BY PRINCIPAL IF INDIVIDUAL, LLC, OR PARTNERSHIP (Must be completed if you qualify)

- (15) Enter name of State or Commonwealth.
- (16) Enter name of County.
- (17) Enter name of Notary Public witnessing transactions.
- (18) Enter name of Principal covered by bond if Individual or Partnership. (Must be owner of Sole Proprietorship or General Partner of Partnership)
- (19) Notary Public enters date bond was witnessed. Must be the same as or later than the signature date.
- (20) Affix Notary Seal. If Notary Public is located outside of West Virginia, seal must be affixed.
- (21) Notary Public affix signature.
- (22) Notary Public enters commission expiration date.

ACKNOWLEDGEMENT BY PRINCIPAL IF CORPORATION or LIMITED LIABILITY COMPANY (Must be completed if you qualify)

- (23) Enter name of State of Commonwealth.
- (24) Enter name of County.
- (25) Enter name of Notary Public witnessing transactions.
- (26) Enter name of Corporate Officer signing bond. (Must be President or Vice-President of Corporation; Manager or Managing Member of Limited Liability Company)
- (27) Enter designated Title of Officer signing bond.
- (28) Enter name of Company or Corporation.
- (30) Notary Public enters date bond witnessed. Must be the same as or later than the signature date.
- (31) Affix Notary Seal. If Notary Public is located outside of West Virginia, seal must be affixed.
- (32) Notary Public affix signature.
- (33) Notary Public enters commission expiration date.

ACKNOWLEDGEMENT BY SURETY (Must be completed by the Surety Company)

- (34) Enter name of State or Commonwealth.
- (35) Enter name of County.
- (36) Enter name of Notary Public witnessing transactions.
- (37) Enter name of person having power of attorney to bind Surety Company.
- (38) Designate title of person binding Surety Company.
- (39) Enter name of Insurance Company (Surety).
- (41) Notary public enters date bond witnessed. Must be the same as or later than the signature date.
- (42) Affix Notary Seal. If Notary Public is located outside of West Virginia, seal must be affixed.
- (43) Notary Public affix signature.
- (44) Notary Public enters commission expiration date.

POWER OF ATTORNEY INSTRUCTIONS

Power of Attorney for Surety must be attached and must show that it was in full force and effect on the execution date indicated on the face of the bond; also the raised corporate seal must be affixed to the Power of Attorney.

- > Name of Attorney on Fact must be listed.
- > Power of Attorney may not exceed imposed limitations.
- > **Certificate date must be the same or later than the execution date entered on Line 7 of bond.**
- > Signature of authorizing official must be affixed. (Signature may be facsimile).
- > Raised seal must be affixed.

Bond forms change; this is for educational purposes only.

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