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**Application** 

For Single Bonds or Aggregate Programs up to \$250,000, complete page 1.

For Aggregate Programs in excess of \$250,000, up to \$500,000, complete page 1 and page 2.

OONTDACTOR DATA		<del></del>	-Mail Address	
CONTRACTOR DATA				•
Type of Business:   Partnershi	· _ · · · ·	•	Sole Proprietorshi	
Company Name				
Company Address				
Type of Work				
Underwriting File Number  Yes	í	∐ No F	ax Number	
OWNER DATA / INDEMNIT	ORS (Provide the information	below on all owners;	use additional sheet if nec	essary)
Name				
City/State/Zip		City/State/Zip		
SS#				
% of Business Ownership	Married 🗌 Yes 🔲 I	No % of Business	Ownership	_ Married 🔲 Yes 🔲 No
Spouse Name				
SS#				_ DOB
***For new applicants, comp	lete and sign the General I	Indemnity Agreer	nent on page 3.***	
BOND REQUEST DATA  Anticipated Start Date  Obligee (Who is requiring the contractor ge	Time for Completion a bond?)	on	Maintenance P	eriod
Obligee Address		City	State	Zip
Job Description & Location				
*This application is <u>not intended</u> f Completion, Hazardous Materials, o Check and Complete: (For private	or Multi-Year Contracts where e jobs or subcontracts, please e	e term of contract is enclose a copy of the	s over 3 years.	
(check one only) (For servic	e type contracts, provide a copy	of the contract.)		
Bid Bond:		OR Contrac	t Price \$	
Bid date		_ Contrac	ct Date (Date when contract i	is signed)
Estimated total amount of bid:	\$·	_ Perform	nance & Payment Bond	Supply Bond
Bid Bond % or flat amount			tractor Performance &	
Status of Outstanding Bid or Per	formance Bonds:	Stand A	Alone Maintenance Bo	<u>nd</u> \$
Bond No.		•	by: Check Bond	Negotiated
Bond No.	_Bid Awarded: 🔲 Yes 🔲 No	Next two lov		
		\$	\$_	
BOND FORM DATA				
CNA Form Obligee Fo		State Form		ontract #
Name of Licensed Agent for the Po	wer of Attorney			•
AGENCY DATA				
Agency Name		Ager	ncy Code	
· · · · · · · · · · · · · · · · ·		٥,	•	

Any person who knowingly and with intent to defraud any insurance company or person files an application containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime under applicable law. The applicants and indemnitors certify the truth of all statements in the application and authorize the Company to verify this information and to obtain additional information from any source including obtaining a credit report.

Phone: 1-800-331-6053 / Fax 605-335-0357



# Complete this page for Aggregate Programs in excess of \$250,000, up to \$500,000.

Contractoria Company Nama	File Number(s) Reference						
Contractor's Company Address					_ State Zi <sub>l</sub>		
(C) Corporations, (S) Corporations, CPA and LLCs:		Provide the company's latest CPA prepared fiscal year-end financial statement. If a CPA prepared financial statement is unavailable, provide the company's in-house prepared fiscal year-end financial statements along with the company's most recent ax return.					
<ul> <li>Business Financial Information for Sole Proprietorships and Partnerships:</li> <li>and</li> </ul>	CPA prepared prepared fisca	ompany's latest ( d financial staten al year-end busir nost recent perso	ent is unavaila ess financial s	able, provide the statement <u>and</u> a	e company's in-l	ouse	
Personal Financial Statements			er's personal financial statement. Include supporting bank tatements for verification purposes.				
EXPERIENCE DATA							
List the three largest contracts completed i	in the last five ye	ears:					
Owner or General Kind of	Work	Location (City/County, S	ate)	Contract Price	Year Completed	Final Gross Profit	
List the two largest jobs you presently have  Owner or General Kind of		ing the following Location y/County, State)	information: Contract Price	% of Completion	Estimated Gross Profit	Date to be Completed	
OPERATIONS DATA Liability Insurance Company and Limits				Expiration	Date/_	/	
Type of trades you perform:							
<ul> <li>Territory in which you perform work (pre</li> </ul>	esent and plann	ed)	···		<u> </u>		
Trades subcontracted:							
GENERAL DATA			•				
Disputes, Financial Difficulties, Problem  a. Failed in business or declared bank b. Failed to complete a job or been ass c. Been in claim with a Surety or denie d. Been involved in any lawsuits or dis e. Do you have any corporate or personel in trust or escrow accounts? f. Are any business or personal asset for any purpose (i.e. collateral for a g. Were you bonded in the past - By w Explain all "yes" answers fully below or	ruptcy?sessed with delated bonding? putes in the last onal assetss restricted or ploan, etc.)? //hom?	ay damages? 5 years?	Yes No Yes No Yes No Yes No Yes No	o	Yes Yes Yes Yes	wner or partner _ No No No No No No No	
AGENCY DATA Agency Name			Agency Co	ode			

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# All new applicants must have a completed and signed indemnity form on file with CNA Surety.

## **GENERAL INDEMNITY AGREEMENT**

THIS AGREEMENT is made by the undersigned Principal(s) (signing below as the "Company") and Indemnitor(s), all of which are individually and collectively referred to as "Undersigned," for the continuing benefit of Surety in connection with any Bond executed on behalf of any Indemnitor or any Principal. The undersigned hereby certify the truth of all statements in the application, authorize the Surety to verify this information and to obtain additional information from any source, including obtaining a credit report at the time of application, in any review or renewal, at the time of any potential or actual claim, or for any other legitimate purposes as determined by the Surety in its reasonable discretion.

**DEFINITIONS.** The following terms shall have the following definitions in this Agreement:

Bond: Any surety bond, undertaking, or other express or implied obligation of guaranty of suretyship executed or committed to by Surety on, before or after this date, and any riders, endorsements, extensions, continuations, renewals, substitutions, increases or decreases in penal sum, reinstatements or replacements thereto.

Principal: The person(s) and entity(ies), for whom any Bond is issued or committed to by Surety, or any one or combination thereof, or their successors in interest, whether alone or in joint venture with others named herein or not named herein, and any person or entity that directly or indirectly, through one or more intermediaries, controls or is controlled by, or is under common control with any party to this Agreement.

Surety: Any and all of Western Surety Company, Universal Surety of America, their respective reinsurers, and any other person or entity which may act as surety or co-surety on any Bond, or any other person or entity who executes any Bond at its request.

#### INDEMNITY. The Undersigned:

- A. Agrees to defend, indemnify, and save harmless Surety from and against any and all demands, liabilities, costs, penalties, obligations, interest, damages and expenses of whatever nature of kind, including but not limited to attorneys' fees (including those of both outside and in-house attorneys) and costs and fees incurred in investigation of claims or potential claims, adjustment of claims, procuring or attempting to procure the discharge of Bond, or attempting to recover losses or expenses from the Undersigned or third parties, whether Surety shall have paid out any such sures; and
- B. Agrees to pay Surety all premiums on Bonds issued by Surety on behalf of any Principal, in accordance with Surety's rates in effect when each payment is due. Premiums on contract bonds are based on the contract price, without reference to the penal sum of the Bond, and shall be adjusted due to changes in the total contract price. On any Bond where Surety charges an annual premium, such annual premium shall be due upon execution of the Bond and upon the renewal or anniversary date of such Bond until satisfactory evidence of termination of Surety's liability as a matter of law under the Bond is furnished to Surety's satisfaction; and
- C. Agrees that in furtherance of such indemnity:
  - i) In any claim or suit arising out of or related to either or both any Bond and this Agreement, an itemized statement of Surety's loss and expense, sworn to by a representative of Surety, or other evidence of disbursement by Surety, shall be prima facie evidence of the fact and extent of Undersigned's liability under this
  - ii) Surety shall have the right to defense and indemnity regardless of whether Surety has made any payment under any Bond.
  - iii) In any suit between any Undersigned or Principal and Surety under this agreement or arising out of any Bond, Surety may recover its further expenses and attorneys' fees incurred in such suit either or both defending or prosecuting such suit.

### GENERAL PROVISIONS. The Undersigned further agrees as follows:

- A) If a claim or demand for performance of any obligation under any Bond is made against Surety, Undersigned, upon Surety's demand, shall immediately deposit with Surety United States legal currency, as collateral security, in an amount equal to the reserves posted by Surety with respect to such claim or demand, plus an amount equivalent to Surety's estimate of its anticipated expenses and attorneys' fees to be incurred in connection therewith. Undersigned acknowledges and agrees that Surety shall be entitled to specific performance of this paragraph.
- B) Undersigned's obligations under this Agreement are joint and several. Repeated actions under this Agreement or as otherwise permitted may be maintained by Surety without any former action operating as a bar to any subsequent action. Surety's release of any one Undersigned shall not release any other Undersigned. No action or inaction of Surety with respect to anyone other than Undersigned shall relieve the Undersigned of any obligation owned under this Agreement. Undersigned shall not be released from liability under this Agreement because of the status, condition, or situation of any party to this Agreement or any Principal.
- C) If the execution of this Agreement by any Undersigned is defective of invalid for any reason, such defect or invalidity shall not affect the validity hereof as to any other Undersigned. Should any provision of this Agreement be held invalid, the remaining provisions shall retain their full force and effect.
- D) Undersigned waives any defense that this instrument was executed subsequent to the date of any Bond and acknowledges that such Bond was executed pursuant to Undersigned's request and in reliance on Undersigned's promise to execute this Agreement. Undersigned understands and agrees that this Agreement is a continuing agreement to indemnify over an indefinite period.
- E) Undersigned has the right to review all Bonds executed by Surety for errors and omissions prior to delivery of the Bond to the obligee, and hereby waives any claim against Surety arising out of any such error or omission.
- F) Surety shall have the right in its sole discretion to decide whether any claims arising out of or related to any Bond shall be paid, compromised, defended, prosecuted or appealed regardless of whether or not suit is actually filled or commenced against Surety upon such claim. Absent Surety's intentional wrongdoing, Undersigned agrees to be conclusively bound by Surety's determination.
- G) Surety may decline to execute any Bond for any reason and shall not be liable to Undersigned, or any person or entity, as a result of such declination.
- H) Undersigned may terminate liability to Surety under this Agreement ONLY by sending written notice by registered mail of intent to terminate to Surety, in care of Western Surety Company, P.O. Box 5077, Sioux Falls, South Dakota 57117-5077. Termination will be effective twenty days after actual receipt of such notice by Surety, only for Bonds signed or committed to by Surety after the effective date.
- Undersigned understands and agrees that other than for the entity issuing a Bond, no other entity included within definition of the "Surety" in this Agreement assumes any
  obligation whatsoever with respect to either this Agreement or such Bond.
- J) A facsimile of this Agreement shall be considered an original and shall be admissable in a court of law to the same extent as an original copy.

Dated:(Month)  Company Name (Print):	(Day)	(Year)		Entity Type: Sole Proprietor Partnership Corporation	=	Authorized Indemnitor: Owner Partner President, Vice President
			•	LLC		Managing Member
Authorized Signature X						
(Printed) Name:			Title:			
Indemnitors: Signature X(Indemnitor) Printed:			<del>.</del>			
Indemnitors: Signature X (Indemnitor) Printed:				nted:		
Indemnitors: Signature X(Indemnitor) Printed:			-	nted:		

All business submitted on this application shall be reviewed and underwritten by Western Surety Company, 101 South Phillips Avenue, P.O. Box 5077 Sioux Falls, SD 57117-5077

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