



A Division of Frankenmuth Insurance

License & Permit / Miscellaneous Commercial Bond Application

Type of Bond: _____
(Attach a copy of the bond form, if available)

Agency (required): _____

Agency Name: _____

Agency City: _____ Agency State: _____

Bond Amount: \$ _____ Effective Date of Bond: _____ Bond Term, if known: _____
of years

Obligee – party requiring the bond (required): _____

Obligee Address: _____

Applicant is: (select one) Individual Partnership C-Corp S-Corp LLC _____

Principal/Applicant: _____

Name to appear on Bond: _____

Principals' Business Address: _____

Principals' Business Description: _____ Fed Tax ID: _____

Year Established: _____ Territory: _____ U.S. Citizen? No Yes Business Phone: _____

Ownership Information

Full Legal Name	Address	Title	SSN	Email	% Owned
1. Name: _____ Spouse: _____	_____	_____	_____	_____	_____
2. Name: _____ Spouse: _____	_____	_____	_____	_____	_____
3. Name: _____ Spouse: _____	_____	_____	_____	_____	_____
4. Name: _____ Spouse: _____	_____	_____	_____	_____	_____

- Does the Applicant have any other Surety bonds in force with any other Surety company? Yes No
- Has another Surety company declined to write this or any previous bond? Yes No
- Have you ever had a bond involuntarily terminated or cancelled? Yes No
- Has there ever been a claim or legal action against any bond executed on your behalf?..... Yes No
- Do you or any of your companies have any pending lawsuits, unsatisfied judgments or liens? Yes No
- Have you or any of your companies declared bankruptcy or become insolvent? Yes No
- Have you or any of your companies been the subject of any legal or administrative proceedings resulting in disciplinary action? Yes No
- Have you ever been convicted of a felony? Yes No
- Has the Applicant been in business under the current name and ownership for less than three years? Yes No
- Does the bond guarantee the performance of a specific contract or agreement? Yes No
- Does the bond cover any type of environmental or pollution exposure? Yes No
- Does the bond guarantee the payment of taxes, fees, wages or payment of any type? Yes No
- Is the applicant a member of an association?..... Yes No

Please attach an explanation for all 'Yes' answers under separate cover.

Application Completed By: _____

Date: _____

Signature

Print Name & Title

The applicant and indemnitors hereby request Frankenmuth Mutual Insurance Company and any affiliated company, their successors, or assigns to become their surety. The undersigned hereby certify the truth of all statements in the application, authorize the Company to verify this information at the time of application and as needed, on an ongoing basis and to obtain additional information from any source, including obtaining credit reports 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 Company in its reasonable discretion. Upon approval of any bond(s), the applicants and indemnitors will receive an e-mail with instructions on how to execute an indemnity agreement through an e-signature process, including instructions on how to review the indemnification agreement prior to execution.

Please speak with your agent for additional details.