

CONTRACTOR DATA

E-Mail Address \_\_\_\_\_

Type of Business: [ ] Partnership [ ] (S) Corporation [ ] (C) Corporation [ ] Sole Proprietorship [ ] LLC [ ] LLP

Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Company Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Trade \_\_\_\_\_ Date started in Business \_\_\_\_\_

Has the applicant been in claim, and/or, denied bonding by another surety? Yes [ ] No [X] Explain (if yes) \_\_\_\_\_

OWNER DATA / INDEMNITORS

(Provide the information below on all owners; use additional sheet if necessary)

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

SS# \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ DOB \_\_\_\_\_

% of Business Ownership \_\_\_\_\_ Married [ ] Yes [ ] No % of Business Ownership \_\_\_\_\_ Married [ ] Yes [ ] No

Spouse Name \_\_\_\_\_ Spouse Name \_\_\_\_\_

SS# \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ DOB \_\_\_\_\_

CNA Surety may obtain a credit report about the Applicant including its Owner(s) and Owners' spouses in order to confirm the information provided in this application and obtain information about Applicant's credit history. For new applicants, complete and sign the General Indemnity Agreement.

BOND REQUEST DATA

If no bond is needed at this time, but only prequalification for future bonding, check here [ ]

Anticipated Start Date \_\_\_\_\_ Time for Completion \_\_\_\_\_ Maintenance Period \_\_\_\_\_

Obligee (Who is requiring the contractor get a bond?) \_\_\_\_\_

Obligee Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Job Legal Description (Project Name) \_\_\_\_\_

Job Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Scope of Work \_\_\_\_\_

\*This application is not intended for use in connection with Design-Build Contracts, Subdivision or Site Improvement over \$100,000, Asbestos Abatement, Completion, Hazardous Materials, or Multi-Year Contracts where term of contract is over 5 years.

Check and Complete: (For private jobs or subcontracts, please enclose a copy of the contract and bond form for projects over \$150,000.)

(check one only)

(For service type contracts, provide a copy of the contract.)

[ ] Bid Bond:

Bid date \_\_\_\_\_

Estimated total amount of bid: \$ \_\_\_\_\_

Engineers Estimate: \$ \_\_\_\_\_ [ ] None

Bid Bond %, or flat amount \_\_\_\_\_

Status of Outstanding Bid or Performance Bonds:

Bond No. \_\_\_\_\_ Bid Awarded: [ ] Yes [ ] No

Bond No. \_\_\_\_\_ Bid Awarded: [ ] Yes [ ] No

OR

Contract Price \$ \_\_\_\_\_

Contract Date (Date when contract is signed) \_\_\_\_\_

[ ] Performance & Payment Bond [ ] Supply Bond

[ ] Subcontractor Performance & Payment Bond

[ ] Stand Alone Maintenance Bond \$ \_\_\_\_\_

Bid secured by: Check [ ] Bond [ ] Negotiated [ ]

Next two lowest bidders \$ \_\_\_\_\_ \$ \_\_\_\_\_ [ ] No other bidders

BOND FORM DATA

Name of Agent signing as Power of Attorney

(Name here) Bonnie L Hand

[ ] CNA Form [ ] State Form (Send copy)

[ ] AIA Form [ ] Obligee Form (Send copy)

[ ] Federal Contract # \_\_\_\_\_

State of Incorporation \_\_\_\_\_

AGENCY DATA

Agency Name Blair Insurance Services, Inc Agency Code 3 7 - 2 0 7 2 9

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.



Complete this page for Aggregate Programs in excess of \$400,000, up to \$800,000.

Contractor's Company Name \_\_\_\_\_ File Number(s) Reference \_\_\_\_\_

Contractor's Company Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

FINANCIAL DATA Please submit the following:

- Company Financial Requirements for (C) Corporations, (S) Corporations, and LLCs: Provide the company's last 2 years fiscal year-end financial statement or tax return. If the latest fiscal year financial statement or tax return is more than 6 months old, then also provide a current interim financial statement.
Business Financial Requirement for Sole Proprietorships and Partnerships: Provide the last 2 years fiscal year-end financial statement on the business. If the fiscal year-end statement on the business is more than 6 months old, then also provide us with a current interim financial statement.
Personal Financial Statements Provide a copy of each owner's latest personal financial statement. If the personal financial statement is more than 6 months old then provide us with a current statement.

Does the contractor have a formal bank line of credit? [ ] Yes [X] No
If "Yes" amount of Line of Credit? \_\_\_\_\_ Amount currently borrowed? \_\_\_\_\_

EXPERIENCE DATA

List the three largest contracts completed in the last five years:

Table with 6 columns: Owner or General, Kind of Work, Location (City/County, State), Contract Price, Year Completed, Final Gross Profit

List the two largest jobs you presently have underway, giving the following information:

Table with 7 columns: Owner or General, Kind of Work, Location (City/County, State), 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: \_\_\_\_\_
Territory in which you perform work (present and planned) \_\_\_\_\_
Trades subcontracted: \_\_\_\_\_

GENERAL DATA

- Disputes, Financial Difficulties, Problems, Etc.
a. Failed in business or declared bankruptcy? Yes No
b. Failed to complete a job or been assessed with delay damages?... Yes No
c. Been involved in any lawsuits or disputes in the last 5 years? Yes No
d. Do you have any corporate or personal assets held in trust or escrow accounts?... Yes No
e. Are any business or personal assets restricted or pledged for any purpose (i.e. collateral for a loan, etc.)? Yes No
f. Were you bonded in the past - By whom? Yes No

Explain all "yes" answers fully below or attach explanation

AGENCY DATA

Agency Name Blair Insurance Services, Inc Agency Code 3 7 - 2 0 7 2 9

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