

# Important

## Commercial Surety Application All Purpose

### Instruction Sheet

We have created an instruction sheet to assist you in completing this application. Please refer to this sheet before sending the Commercial Surety Application back to The Hartford. It will help avoid any delays in processing your application due to missing information.

1. Please complete page 1 in its entirety. (Some commonly overlooked items include producer code, year established, date of bond, and obligee information)
2. Next, complete one of the following 6 sections, as applicable.

Section 2	License and Permit or Miscellaneous Bonds
Section 3	Lost Instrument Bonds. Include a completed Affidavit
Section 4	Public Official Bonds (includes Treasurer and Tax Collector)
Section 5	Fiduciary (Probate) Bonds
Section 6	Receiver or Bankruptcy Trustee
Section 7	Judicial Bonds (includes Replevin, Injunction, Appeal, Release of Attachment, and Attachment)

3. The final page is the ***Indemnity Agreement***. A checklist of 4 questions will help remind you of the key items that need to be addressed:
  - **Did you date the form (directly above the signatures)?**
  - **If the applicant is a Corporation, Partnership or LLC, is the respective name entered with the corresponding signature of the President (or authorized officer) immediately below? (Seals should be used, as appropriate)**
  - **If the applicant is an individual, did he/she sign the form?**
  - **Did a witness sign the form attesting to the authenticity of the Indemnitors' signature?**

# All Purpose

## Commercial Surety Application



**For all business complete page 1 of this application in its entirety.  
Complete Section 2 – 7 for the appropriate bond category indicated in General Information section below.  
Application must be SIGNED, WITNESSED and DATED.**

### General Information Questions

**Application is being made for which one of these bond categories? (\*Fill out section indicated.)**

- License & Permit or Miscellaneous – \*Sec. 2    
  Lost Instrument (Include completed Affidavit) – \*Sec. 3    
  Public Official – \*Sec. 4  
 Fiduciary (Probate) – \*Sec. 5    
  Receiver or Bankruptcy Trustee – \*Sec. 6    
  Court: Judicial – \*Sec. 7

Type of Bond (describe purpose) \_\_\_\_\_  
(Attach a copy of the bond form, if available)

**Agency Name:** Norman-Spencer Agency, Inc.  
**RO/Agency Code:** 33-702673     **Sub Producer Code:** \_\_\_\_\_     **Bond Number:** \_\_\_\_\_  
**Agency City:** Dayton     **Agency State:** Ohio

**Bond Amount:** \$ \_\_\_\_\_     **Effective Date of Bond:** \_\_\_\_\_     **Bond Term, if known:** \_\_\_\_\_  
# of years

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

**Applicant (Principal):** \_\_\_\_\_

**Name to appear on Bond, if different from Applicant:** \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

**Applicant's Business Description or Latest Occupation:** \_\_\_\_\_

**Number of Years in Business:** \_\_\_\_\_

**SS#:**     -     -         **Fed Tax ID:** \_\_\_\_\_     **U.S. Citizen?**    
 No      Yes

**Business Phone:** \_\_\_\_\_     **Fax No.:** \_\_\_\_\_     **Email:** \_\_\_\_\_

**Obligee – party requiring the bond (required):** \_\_\_\_\_

**Obligee Address:** \_\_\_\_\_

**Billing Method:**    
 Agency Bill    
 Direct Billed – full payment    
 Direct Bill TABS Account  
TABS Account No.: \_\_\_\_\_

**Billing Address, if different from Applicant's Address:** \_\_\_\_\_

### 1 General Underwriting Questions

(required for all Applicants)

- Does the Applicant have any other Surety bonds in force?      No      Yes  
 Has another Surety company declined to write this or any previous bond?      No      Yes  
 Have you ever had a bond involuntarily terminated or cancelled?      No      Yes  
 Has there ever been a claim or legal action against any bond executed on your behalf?      No      Yes  
 Do **you** or any of **your** companies have any pending lawsuits, unsatisfied judgments or liens?      No      Yes  
 Have **you** or any of **your** companies declared bankruptcy or become insolvent?      No      Yes  
 Have **you** or any of **your** companies been the subject of any legal or administrative proceedings resulting in disciplinary action?      No      Yes  
 Have **you** ever been convicted of a felony?      No      Yes

**(If you answered Yes to any of the above questions, please attach a detailed explanation.)**





