

ATLANTIC UNDERWRITING

Surety Questionnaire

AGENCY ADDRESS _____

 TEL. NO. _____ FAX NO. _____
 PRINCIPAL TAX ID NO. _____
 ADDRESS _____ TEL. NO. _____
 _____ FAX NO. _____

1. State whether a Corporation, Partnership or Proprietorship _____
2. Date operations started: _____ Date/State Incorporated _____
3. Desired Work Program: Single Job: _____ Total Aggregate _____
4. Type of Business/Work performed _____
5. Previous Surety/Tel No. _____

	SOCIAL SECURITY	TITLE	% OF OWNERSHIP
INDIVIDUAL	NUMBER		
NAME _____			
SPOUSE _____			
ADDRESS _____			
NAME _____			
SPOUSE _____			
ADDRESS _____			
NAME _____			
SPOUSE _____			
ADDRESS _____			

7. Largest contracts completed within past 3 years:

OBLIGEE AND ADDRESS	PHONE NUMBER	CONTRACT AMOUNT	IF BONDED, WITH WHOM	DATE COMPLETED

8. Has this organization or has any organization in which any officer or partner been associated ever failed to complete any contract or made a compromise with creditors or filed or been declared bankrupt? If yes, attach full details. yes no

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8A. Are you or have you been involved in any law suits, divorce actions or any other form of court litigation?
If yes, attach full details. yes no

8B. Will all stockholders and spouses personally indemnify the Surety? yes no

9. In what other lines of business are officers or partners financially interested? Give details below. _____

10. Include resumes or use attached format for all owners/key personnel.

11. List life insurance policies payable to organization: _____

12. Prime suppliers

NAME	FULL ADDRESS	PHONE NO.

13. List name, address and telephone number of other references such as Architects, Engineers, Owners, General Contractors and attach copies of reference letters, if any.

NAME	FULL ADDRESS	PHONE NO.

14. At what bank(s) do you have and account? Give account number, bank name, address, telephone number and officer handling account. Attach copy of bank letter using enclosed format. _____

15. Attach three fiscal year end statements. Note: If the most current statements is nine (9) months or more old, then a six (6) month statement must be included. Also, complete and attach form "Status of Uncompleted Contracts."

16. Attach current personal financial statement(s) for Owner, Partners, or major Stockholders, (as applicable) – form attached.

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I acknowledge that all information is complete and correct and is given to induce the insurance company to execute surety bonds. I understand that false information may constitute misrepresentation or fraud.

I, the undersigned, am authorized to allow Atlantic Underwriting and the surety company to investigate the credit, bank, performance reference, supply house, and prior sureties of the company, its employees and owners or other person, firm or corporation, and is hereby authorized to furnish to Atlantic Underwriting and the surety whenever requested, any information concerning any transaction or anticipated transaction with the undersigned for bond purposes.

(Name of company here) _____

Dated this _____ 20 _____

(If corporation, sign and seal here)

(Witness sign here if applicant is not incorporated)

(Signature of applicant if not a corporation)