

Atlantic Underwriting

Thank you for your interest in utilizing our services for bonding. Please provide us with the following information so that we may proceed with considering bonding for your company.

- ✓ **Surety Questionnaire.** This form must be signed and dated by an individual legally authorized to sign on behalf of the company.
- ✓ **Past Three Year End CPA Prepared Company Financial Statements.** If CPA prepared statements are not available, please forward copies of Corporate Federal Tax Returns.
- ✓ **Personal Financial Statements on All Owners.** Statements must be signed and dated by all parties (i.e. husband and wife, when applicable).
- ✓ **Schedule of Uncompleted Work as of the Current Date** - Schedule must be dated.
- ✓ **Bank Reference Letter.** Please have the bank indicate the specific dollar amount of the line of credit, how it is secured and the specific dollar amount currently available.
- ✓ **Bond Request Form.** Please complete this form regarding the specific bid bond or final bond request. If the request is for a final bond, please attach a copy of the contract and/or award letter.

If you should have any questions, please do not hesitate to give our office a call at (610) 397-0570.

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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. _____

6. List Owners-Spouses:

INDIVIDUAL	SOCIAL SECURITY NUMBER	TITLE	% OF OWNERSHIP
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)

**PERSONAL FINANCIAL STATEMENTS
TO
ATLANTIC UNDERWRITING
(Hereinafter called the Company)**

NAME _____ SSN _____

SPOUSE _____ SSN _____

FULL ADDRESS _____

STATEMENT OF ASSETS AND LIABILITIES AS OF (INSERT DATE) _____

ASSETS

Cash in Bank (Schedule A)	
Cash on Hand	
Stocks, Bonds, Etc. (Schedule B)	
Accounts Rec. (Schedule C)	
Cash Value of Life Insurance (Schedule D)	
Notes Receivable (Schedule E)	
Equipment at Book Value	
Real Estate (Schedule G) (Cost or Book Value)	
All Other Assets	
TOTAL ASSETS	

LIABILITIES

Notes Payable (Schedule F)	
(a) To Banks regular	
(b) to Others	
Accounts Payable	
Income Taxes	
Accrued Taxes Payable	
Encumbrance on Equipment	
Monthly Payments \$	
Mortgage on Real Estate (Schedule H)	
All Other Liabilities	
TOTAL LIABILITIES	
NET WORTH	
TOTAL LIABILITIES AND NET WORTH	

SOURCES OF INCOME

Salary _____	\$ _____
Bonus and Commissions _____	\$ _____
Dividends _____	\$ _____
Real Estate Income _____	\$ _____
Other Income – Itemize _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL	\$ _____

CONTINGENT LIABILITIES

As Endorser, Co-Maker or Guarantor _ \$ _____
Legal Claims _____ \$ _____
1) Are any assets pledged <input type="checkbox"/> yes <input type="checkbox"/> no Explain: _____
2) Are you defendant in any suits or legal actions? Explain: _____
3) Have you or any business in which you were associated ever entered into bankruptcy or compromised with creditors? Explain: _____

The undersigned hereby agree(s) that the Above financial statement is made expressly for the purpose of inducing the Company to execute a certain bond (or bonds) on behalf of _____.

The undersigned expressly agrees that the banks, persons, firms, and corporations above mentioned or that are concerned with any items on the above schedules are hereby authorized to give the Company any and all information in connection with the matters herein referred to or listed.

The undersigned affirms this statement of his financial condition, including accompanying schedules and statements, is true, accurate and complete.

WITNESS: Signed this _____ Day of _____, 20 _____

SIGNATURE (SEAL)

SIGNATURE (SEAL)

SCHEDULE "A" – CASH IN BANK

Name and Address of Bank	Deposit in the name(s) of	Pledged or Assigned	Amount

SCHEDULE "B" – STOCKS, BONDS, ETC.

Name of Security	Ownership in Names(s) of	If any Pledged, State to Whom and for What	No. Shares	Actual Value Per Share	Total Market Value

SCHEDULE "C" – ACCOUNTS RECEIVABLE

Name and Address	When Due	Collectible in Due Date?	Amount Due

SCHEDULE "D" – CASH VALUE OF LIFE INSURANCE

Name of Insurance Co.	Who Owns This Policy?	Is This Policy Assigned?	To Whom Assigned?	Face Value	Amount of Loan	Cash Surrender Value This Date

SCHEDULE "E" – NOTES RECEIVABLE

Name and Address of Party From Whom Due	When Due	For What Date?	How Secured	Amount Due

SCHEDULE "F" – NOTES PAYABLE

Name and Address of Party To Whom Payable	For What Purpose	What Security	When Due	Amount Payable

SCHEDULE "G" – REAL ESTATE

Location and Description of Property	In Whose Name Is Title	Date of Purchase	Cost	Improvements	What Rents Per Month	Present Force Sale Value

SCHEDULE "H" – MORTGAGES ON REAL ESTATE

Amount of Mortgage	Name and Address of Mortgage Holder

Atlantic Underwriting Group, Inc.

SURETY BOND SPECIALISTS

CONTRACT STATUS REPORT (COMPLETED and UNCOMPLETED WORK)

DATE		CONTRACTOR			ADDRESS					
BONDED	UNBONDED	CONTRACT NO. AND DATE	DESCRIPTION OF CONTRACT, TYPE AND LOCATION	START DATE	CONTRACT PRICE PLUS CHANGE ORDERS	ORIGINAL ESTIMATED GROSS PROFIT	TOTAL BILLED TO DATE (INCL. RETAINAGE)	TOTAL RECEIVED	TOTAL COSTS TO DATE	ESTIMATED COST TO COMPLETE NOW
			NAME OF OWNER AND COMPLETE ADDRESS	ANTICIPATED DATE OF COMPLETION						
		TOTALS								

CONTRACTS COMPLETED SINCE LAST FISCAL YEAR END CLOSING

BONDED	UNBONDED	CONTRACT	DESCRIPTION AND LOCATION	FINAL PRICE	TOTAL COST	GROSS PROFIT/LOSS
		TOTALS				

Bank Letter of Customer Relationship

Please take this form to your banker and request that they write, **on the bank's letterhead**, a letter addressed to:

Atlantic Underwriting Group, Inc.
992 Old Eagle School Road, Suite 915
Wayne, PA 19087

Our business is to establish and place bonds for our clients. One of the requirements of bonding is for us to obtain a reference letter from our client's bank.

This letter should incorporate answers to the questions below:

1. Date account was opened.
2. Average checking balance for the past twelve (12) months, and checking and savings balance.
3. We need to know the dollar figure of the Line of Credit available and the dollar figure of the present amount in use. We also need to know the expiration date of the line. If the Line of Credit is secured, please indicate the specific security.

It is important that your letter show dollar figures of the line of credit and of the present amount in use. The terminology of low, high or medium is not acceptable. Working capital is an important part of bonding, and a line is considered part of the working capital: therefore it is important we know the dollar figures. If we do not have this information, we cannot place an account for bonding.

4. Amounts and terms of existing loans.
5. General recommendations as to character, business qualifications, etc.

Name of Bank _____

Officer _____ Title _____

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Surety Bond Specialists

Date _____

OFFICE USE ONLY

DATE _____	Conditions
APPROVED _____	1. _____
AUTHORITY _____	2. _____
SUBMITTED BY _____	3. _____

BOND REQUEST FORM

Contractor's Name and Address _____

Obligee / Owner Name Address _____

Job Description, Location, Job Number, Solicitation Number _____

Engineer/Architect Name and Address _____

Completion Time _____ % of Performance Bond _____ % Being Subcontracted _____

Penalties _____ % of L & M Payment Bond _____ Current Work on Hand _____

Maintenance Period _____

As Pertains to Bid Bond

Bid Date _____ Bid Time _____

Estimated Amount _____

Percentage of Bid Bond _____

Specific Form YES NO
If yes, please attach

As Pertains to Final Bond

Contract Date _____

Contract Price \$ _____

Bid or Negotiated _____

2nd Bidder _____

3rd Bidder _____

Specific Form Yes No
If yes, please attach

DELIVERY INSTRUCTIONS

Express Mail

Fed Ex Airborne UPS

Account # _____

Send to: _____

Name

Address

City, State

Telephone

Send Via First Class Mail

to: _____

Pick-up

on _____