

I Business Information			
Description:	Bond Amount:	Effective Date:	Bond Term:
Type Name exactly as it is to appear on the bond (Applicant):			
Applicant's Business Address:			
Are there any other locations? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please attach a complete listing of all addresses			
Applicant's Federal Tax ID:			
Phone:	Email Address:		
Applicant is (select one) <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC			
Date Business Commenced:	Number of years in Business:		
Applicant's Business Description or Latest Occupation:			
Annual Gross Revenue for Most Recent Fiscal Year End (Amount / Year End):			
Net Worth as of Most Recent Fiscal Year End (Amount / Year End):			
Number of Employees:			
Principal Owner(s)' Name and address (if Partnership or LLC, list all owners and addresses on separate sheet)			
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Spouse Name and address:		Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How is your credit? <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Challenged <input type="checkbox"/> I am not sure			

II Bond Information	
<u>Underwriting Questions</u>	
Does applicant have any other Surety Bonds in force with any other Surety Company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever had an application for a bond declined?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever had a bond involuntarily terminated or cancelled?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant or affiliates been the subject of any legal or administrative proceedings resulting in disciplinary action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever caused a Surety to suffer a loss?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has there ever been a claim or legal action against any bond executed on applicant's behalf?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does applicant or any affiliates have any pending lawsuits, unsatisfied judgments or liens?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant or affiliates ever declared bankruptcy or become insolvent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant continuously been in business under the current ownership for at least years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the Applicant is a business, has it been in business at the same location for at least 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the Applicant is an individual, have you resided at your current address for at least 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you carry any insurance that affirmatively responds to the bonded obligation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide details _____	
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the bond guarantee coverage for more than one year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered YES to any of the above questions, please attach a detailed explanation	
Do all owners who are individuals own a home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your company ever been previously issued a U.S. Custom Import Bond? If so:	
What is the US custom bond # on your most recent U.S. Custom Import Bond? _____	
What are the effective and expiration dates on your most recent U.S. Custom Import Bond? _____	
Was this U.S. Custom Import Bond Terminated? If so, why? _____	
Have you ever imported merchandise subject to Anti-Dumping Duties? If so, please describe this merchandise? _____	
Is any of the merchandise listed on this U.S. Custom Import Bond application subject to Anti-Dumping Duties? If so, please describe this merchandise? _____	

III. Principals of Applicant

Name & Title	DOB	SSN	Spouse Name	% Owned	Yrs w/Applicant	Yrs in Occupation

IV. Business Management

Does Applicant prepare any of the following (please check where applicable):

- Monthly Balance Sheet
- Monthly Profit and Loss Statement
- Quarterly Cash Flow Analysis
- Create and Monitor a Fiscal Budget

V. Information Requirements

- ____ Last three (3) CPA Fiscal Year End Statements
- ____ Most recent in house balance sheet and profit and loss statement
- ____ Copy of latest Federal Tax for applicant
- ____ Current Personal Financial Statement and most recent federal tax return
- ____ Current Bank Line of Credit
- ____ If there is a current FMC/NVOCC bond in effect, attach a copy of that bond with all amendments and explain why you are switching sureties _____

Important Information—PLEASE READ

1. All bonds must be paid in full before the release of the bond unless other arrangements have been made.
2. Applicant and all owners of applicant must sign General Indemnity Agreement and have signatures notarized.
3. All bonds / bond approval is subject to final underwriting approval.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

Signature _____ Date: _____

Print Name and title here: _____

Personal Financial Statement – All Owners with 10% or more ownership must complete the following:

*NOTE: This form to be used for Personal Financial statements only, NOT TO BE USED FOR BUSINESS STATEMENTS.

Personal Financial Statement of: _____ SSN: _____

Address / City / state / Zip: _____

Home Phone #: _____ Business Phone #: _____

Name of Spouse: _____

As of (date): _____

***Information Required**

CURRENT ASSETS – (Own)		CURRENT LIABILITIES – (Owe)	
Cash on hand (Not in Bank)	\$	Notes Payable to	\$
Cash in following banks	\$	Sales Contracts & Chattel Mortgages	\$
Stocks & Bonds	\$	Accounts Payable	\$
Accounts Receivable	\$	Currents portion of long term debt	\$
Notes Receivable	\$	Other current liabilities	\$
IRA or Retirement Acct	\$	Current year income taxes unpaid	\$
Total Current Assets	\$	Real Estate taxes unpaid	\$
Fixed Assets	\$	Total Current Liabilities	\$
Real Estate- Residential	\$	Long Term Liabilities	\$
Real Estate- Other	\$	Real Estate debt- Residential	\$
Cash vale of life Insurance	\$	Real Estate debt – Other	\$
Other assets & Investments	\$	Borrowed on Life Insurance	\$
		Other Long Term Debt	\$
		Total Long Term Liabilities	\$
Total Fixed Assets	\$	Net Worth	\$
Total Assets	\$	Total Liabilities & Net Worth	\$

Contingent Liabilities:

ENDORSEMENTS OR GUARANTEES \$ _____ FOR OTHER PURPOSES \$ _____

Give details:

X

Signature

(the above information is accurate and true as of the date indicated on the page)

Date

I AUTHORIZE SURETY TO MAKE INQUIRIES AS NECESSARY CONCERNING OR PERTAINING TO THE UNDERSIGNED'S FINANCIAL STANDING CREDIT, CHARACTER OR MANNER OF MEETING OBLIGATIONS TO VERIFY THE ACCURACY OF THE STATEMENT MADE AND TO DETERMINE MY CREDIT WORTHINESS, I CERTIFY THE ABOVE AND THE STATEMENTS CONTAINED IN THE ATTACHMENTS ARE TRUE AND ACCURATE AS OF THE STATED DATE(S) A COPY OF THIS AGREEMENT SHALL BE CONSIDERED THE SAME AS THE ORIGINAL. THIS AUTHORIZATION IS TO REMAIN IN FULL FORCE UNTIL RESCINDED BY THE APPLICATION IN WRITING. THESE STATEMENTS ARE MADE FOR THE SOLE PURPOSE OF OBTAINING A BOND I UNDERSTAND FALSE STATEMENTS MAY RESULT IN FORFEITURE OF BENEFITS AND POSSIBLE PROSECUTION "ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE AND INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION, FALSE OR MISLEADING INFORMATION MAY BE FOUND GUILTY OF A CRIMINAL AND OR CIVIL OFFENSE".

If you are applying for Airport Security Bond / C1 Bond / Activity One Bond / Airport Custom Security Area Bond / A1 Bond / ASB: Any company, entity or person or individual that works around or in an CBP controlled international airport and has access to Custom airport security areas must be bonded. The company, entity, or individual must purchased an Airport Security Bond aka Activity One Bond. The minimum bond amount set by CBP however CBP Port Directories at the international airport has the discretion to raise the bond amount or set new bond amount limits at anytime. The Airport Security Bond / ASB will be issued by the CBP in CBP-301 Form, the bond is for the usage by the company, entity or individual and is not considered an Custom Import Bond, the company, if the company, entity or individual uses this ASB to import commodity from any foreign country, this action will be a violation of the 19 CFR 113.62(i) and CBP has the authority to terminate immediately.

I/We/Applicant agree that when this application is approved, I/We/Applicant will then be fully and contractually responsible for the full payment amount as confirmed and agreed on email and/or our website. When applicant bond number/certificate is issue & if applicant/reseller refuses to pay within day, then bond provider has a right to cancel/terminate applicant bond anytime I/We/Applicant also understands that invoices and correspondence will be communicated thru the email address, phone # or other email given by signer. This bond application encompasses the terms, conditions and languages as specified in CBP-5291 (Power of Attorney Form) and satisfy the requirements of 19 CFR 149.5(c) and shall be retained by this bond provider for as long as applicants continues to use and operate the bond acquired thru this bond provider. A signed faxed or scanned email copy of this agreement and power of attorney form can be considered as an original copy. IF when Renewing Bond(s), it MUST be re-new eight (8) weeks in advance. I/We/Applicant acknowledges that when payment is made in-full there is/will be NO pro-rate or NO refunds. Bond surety company, its affiliates and subsidiaries may terminate the bond at anytime without Notice if ADD/CVD duties are assessed by Custom against the bond of Applicant and/or US Customs/FMC/any other government agency terminate your permit/license/bond(s). Further, I/We/Applicant well acknowledge and allow bonding company, its affiliates, subsidiaries, associates and independent contractors to email any promotional items that may benefit Applicant. After submitting a POA and this Application IRS # / EIN # / Tax id # / S.S.N # / CAN # can NOT be change/amend, so please double check before signing a signature. Also, all Bond(s) are subject to approval by U.S. Customs/ FMC and our underwriter based upon your good credits. Submissioner/as-submitter/Signer are NOT obligated to use US Import Bond / Filing ISF service(s) and/or for any of their future service(s) . However, if Submissioner /as-submitter/Signer does use the service(s) with US Import Bond / Filing ISF, then this above Agreement will be in effect, also below Power of Attorney (POA) to communication behalf of Submissioner/as-submitter/Signer with US Customs Border Protection (CBP), Federal Maritime Commission (FMC), any other government agencies, other companies, other individual(s) and Etc..

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