



APPLICATION FOR BOND
BMC - 84

1060 Calle Cordillera
Suite 101-103
San Clemente, CA 92673
(949)361-1692 Fax (949)361-9926
www.southcoastsurety.com
apps@southcoastsurety.com

BOND INFORMATION		TYPE OF BOND FMCSA Property Broker Bond	AMOUNT \$75,000	ACCT OR LICENSE #	EFFECTIVE DATE
OBLIGEE'S NAME & ADDRESS: (ENTITY REQUIRING THE BOND)				COUNTY BOND IS REQUIRED IN	
PLEASE ATTACH ANY FORMS PROVIDED FOR THIS PARTICULAR BOND TYPE					
BUSINESS INFORMATION		COMPANY NAME (AS IT MUST APPEAR ON THE BOND)		PHONE #	HOW LONG IN BUSINESS
# of Employees	COMPANY ADDRESS			CITY	STATE ZIP
COMPANY IS A: <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC <input type="checkbox"/> LLP		DATE FORMED	# OF OWNERS, PARTNERS OR MEMBERS	CONTACT PERSON	WEBSITE
NATURE OF BUSINESS			FEDERAL TAX ID #		
PERSONAL INFORMATION, APPLICANT # 1		LAST NAME		FIRST NAME	
SPOUSES NAME		SPOUSES SSN		RESIDENCE ADDRESS	
EMPLOYER	EMPLOYER PHONE #		CITY	STATE ZIP	RESIDENCE/MOBILE PHONE
ARE YOU THE TRUSTEE, TRUSTOR OR BENEFICIARY OF ANY TRUST? <input type="checkbox"/> YES <input type="checkbox"/> NO	EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN?	PENDING OR PRIOR IRS LIENS? <input type="checkbox"/> YES <input type="checkbox"/> NO		ANY LAWSUITS PENDING AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO	EVER FAILED IN BUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU OWN REAL ESTATE: <input type="checkbox"/> YES <input type="checkbox"/> NO	CURRENT MARKET VALUE	CURRENT LOAN BALANCE			
		NAME OF LENDER			
PERSONAL INFORMATION, APPLICANT # 2		LAST NAME		FIRST NAME	
SPOUSES NAME		SPOUSES SSN		RESIDENCE ADDRESS	
EMPLOYER	EMPLOYER PHONE #		CITY	STATE ZIP	RESIDENCE/MOBILE PHONE
ARE YOU THE TRUSTEE, TRUSTOR OR BENEFICIARY OF ANY TRUST? <input type="checkbox"/> YES <input type="checkbox"/> NO	EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN?	PENDING OR PRIOR IRS LIENS <input type="checkbox"/> YES <input type="checkbox"/> NO		ANY LAWSUITS PENDING AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO	EVER FAILED IN BUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU OWN REAL ESTATE: <input type="checkbox"/> YES <input type="checkbox"/> NO	CURRENT MARKET VALUE	CURRENT LOAN BALANCE			
		NAME OF LENDER			
HAVE YOU, YOUR SPOUSE OR COMPANY EVER: FAILED IN ANY BUSINESS VENTURE? <input type="checkbox"/> YES <input type="checkbox"/> NO DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO BEEN A PRINCIPAL OR INDEMNITOR ON A BOND WHICH A CLAIM WAS BROUGHT SUBJECT TO A FEDERAL OR STATE TAX LIEN? <input type="checkbox"/> YES <input type="checkbox"/> NO			ARE YOU A GUARANTOR FOR A THRID PARTY LIABILITY? <input type="checkbox"/> YES <input type="checkbox"/> NO HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO ARE ANY OF YOUR ASSETS IN TRUST(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YOU ANSWERED YES TO ANY OF THE QUESTIONS ABOVE, ATTACH A DETAILED EXPLANATION.		
AFFILIATED COMPANIES		LIST THE NAME, ADDRESS AND TYPE OF BUSINESS FOR ALL AFFILIATED COMPANIES			
COMPANY NAME/TYPE OF BUSINESS		ADDRESS			
COMPANY NAME/TYPE OF BUSINESS		ADDRESS			
COMPANY NAME/TYPE OF BUSINESS		ADDRESS			
INFORMATION REQUIRED		PLEASE LIST ALL INDUSTRY TRADE GROUP MEMBERSHIP:			
APPLICANT MUST PROVIDE: <input type="checkbox"/> CPA FISCAL YEAR END STATEMENT, OR <input type="checkbox"/> MOST RECENT IN-HOUSE BALANCE SHEET & PROFIT LOSS STATEMENT <input type="checkbox"/> CURRENT BANK LINE OF CREDIT <input type="checkbox"/> CURRENT BUSINESS BANK STATEMENT					

Signature: _____ Date: _____

Name and Title: _____