FORM 02
APPLICATION

RLI Insurance Company P.O. Box 3967 Peoria, IL 61612-3967 309-692-1000 800-645-2402 Fax: 309-692-8637

APPLICANT INFORMATION	Applicant (for partnership, give full names of partners and trade name)				Individual ☐ Partnership ☐ Corporation ☐
Address	(City)	(State)	(Zip)		How long in Business?
Nature of Business or Occupation	Previous Bonding Company		Reason for changing Bonding Company		
BOND INFORMATION	Type of Bond (Circle One) Auctioneer or Auction Firm	Amount of Bond $	Effective Date		
Complete Name and Address of Obligee State of Washington, Department of Licensing, Auctioneer Section, P. O. Box 9649, Olympia, WA 98507-9649					
PERSONAL INFORMATION					
Individual's Name	Social Security No.				
Residence Address	(City)	(State)	(Zip)	(Phone No.)	
Business Address	(City)	(State)	(Zip)	(Phone No.)	
INDEMNIFICATION AGREEMENT					

I agree to indemnify RLI Insurance Company (hereinafter "Surety") in connection with any bond executed on behalf of the person or entity named as "Applicant" above. I certify that all the information provided is true, and acknowledge that Surety is relying on this information to issue a bond. I agree that proof of the falsity of any statement will be prima facie proof of material, intentional and fraudulent misrepresentation for all purposes of law and equity. I authorize Surety or its agents to investigate my credit, now and at any time in the future, with any institution, person or entity. I further agree:

1) To pay Surety each premium or premiums due, until satisfactory evidence that Surety's liability is terminated, and agree that such premium is fully earned upon issuance of a bond and is not refundable in the first year of coverage.
2) To pay Surety all sums demanded by Surety to cover any liability, claim, suit or judgment against the bond, including any legal fees and expenses.
3) To hold harmless and indemnify Surety from any and all liability, damages, loss, costs and expenses of every kind, including attorney fees, which may be sustained or incurred arising out of the execution, enforcement, procurement of release, or other action involving the application and/or issuance of the bond.
4) To pay interest, at the highest legal rate allowed, in the event of any payment by Surety, from the date such payments are made.
5) That Surety has the exclusive right to defend, settle, pay, or appeal any claim, and an itemized statement of loss and expense incurred by Surety shall be prima facie evidence of the fact and extent of my liability to Surety.
6) That Surety may decline to become a surety on any bond, may cancel or amend any bond with or without cause, alter the penalty, terms and conditions of any bond, complete any blanks contained in the application or indemnity agreement at the time of execution, or procure its release from said suretyship under any law for release of sureties; all without liability to Surety thereon.
7) To provide Surety with cash or other property acceptable to Surety, upon demand, as collateral security for any loss reserve. Surety may hold such collateral security until it has determined that it is no longer exposed to a loss and may retain or sell the collateral security to reimburse itself.
8) That a facsimile copy of this agreement shall be considered an original and shall be admissible in a court of law to the same extent as the original agreement.
9) This agreement shall apply to all renewals, continuations, substitutions and extensions of the suretyship herein applied for.

AGENCY INFORMATION

Agency Name E. R. Munro and Company
Agency Code 37069
Address One Gateway Center, Suite 400, 420 Fort Duquesne Boulevard
Pittsburgh, PA 15222-1460
Agency Phone (877) 376-8676
Agency Fax (412) 281-6195

Applicant must sign on the line with the X.
Signed this _____ Day of _____ , _____ .
X _____ Indemnitor

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false, incomplete, or misleading information, or conceals information concerning any material fact thereto, commits a fraudulent insurance act, which is a crime punishable by incarceration, and shall also be subject to civil penalties.