

Merchants Bonding Company (Mutual) P.O. Box 14498, Des Moines, Iowa 50306-3498

Phone: (800) 678-8171 Fax: (515) 243-3854

Bond No.

## COMMERCIAL BOND APPLICATION

Applicant (Exactly as it will appear on bond)												
Home Address				Single Legal							Married mestic Partner	
City	State		Zip		Phone		FEIN/Social Security #					
Home E-mail				Business E-	Business E-mail							
Business Address				City	City State				Zip			
Type of Business or Individual's Occupation			Ту	/pe of Organ	e of Organization Individual Partnership How long in busi					iness?		
Name & Address of Owner or Co-Applicant or Indemnitor							Social Security #				% of Ownership	
Name & Address of Owner or Co-Applicant or Indemnitor							Social Security #				% of Ownership	
Obligee Name & Address	ne & Address Type of Bond					Amount of	Bond	Effec			ve Date	
Previous Surety ☐ Yes ☐ No If Yes, giv	∕es, give name and reason for change.			Other Surety Bonds in force?			□Yes □I	☐Yes ☐ No If Yes, provide name of Surety:				
Has the applicant had any bankruptcies, liens, or judgments or compromises with any creditors in the past 5 years?   Yes  No If Yes, submit for underwriting.												
<b>NOTICE</b> : The undersigned individual(s) hereby gives consent to MERCHANTS BONDING COMPANY (MUTUAL), and it subsidiaries, to obtain a consumer credit report about the individual in connection with this application for insurance. This authorization extends to subsequent consumer credit reports obtained for the purpose of reviewing, increasing the amount of, or any other legitimate purpose associated with the bond.												
INDEMNITY AGREEMENT												
This Agreement entered into by and between the undersigned applicant or applicants and/or indemnitors, hereinafter called the undersigned, and Merchants Bonding Company (Mutual), hereinafter called the Company, witnesseth:  The undersigned certifies that the foregoing statements and declarations are true and, in consideration of the Company executing as surety the herein bond applied for, does hereby promise and agree to pay an annual premium to the Company until such time as the undersigned shall furnish the Company with evidence satisfactory to it of the complete termination of its liability on said bond.  The undersigned further agrees to indemnify and save harmless the said Company, in connection with any bond executed on behalf of the person or entity named as applicant, for, from and against any and all losses, costs, damages and expenses of any nature whatsoever, including counsel fees and expenses, and reimburse said Company for loss adjusting expenses and compensation at the rate of \$100.00 per day for officers and \$50.00 per day for all other personnel, which may accrue to the said Company preason of the said Company having become surety on said bonds.  The undersigned hereby further agrees that the vouchers or other evidence of payments made by the said Company under its obligation of suretyship shall be conclusive evidence against the undersigned of the fact and extent of the undersigned's liability to the said Company under said obligation of suretyship shall be conclusive evidence against the undersigned whether said payments were made to discharge a penalty thereunder, incurred in the investigation of a claim made thereon or adjusting a loss or claim in connection therewith, or in completing the work covered thereby, and whether voluntarily made or paid after suit and judgment against said Company.  If the Company shall set up a reserve to cover any claim, suit or judgment under any such bonds, the undersigned will, immediately upon demand, deposit with the Company as und of money equal to such r												
Dated the day of				Sign	Applica	tion Twic	e - as App	licant an	d Indemi	nitor		
Witness In consideration of the MERCHANTS BONDING COMPANY (Mutual) executing the bond herein applied for, I (we) jointly and severally join in the above indemnity agreement.												
Witness			Indem									
Witness Ir			Inden	ndemnitor								
Witness			Indem	Indemnitor								
Witness			lm -l -	nitar								