



Commercial Bond Application

NY Nail Salon Bond

Bond Information

Bond Amount: _____

Effective Date: _____

To Whom Payable: NY Dept of State - Division of Licensing Services
(*Obligee name)

Expiration Date: _____

*10% premium reduction is applied when purchased for more than 1 year

Obilgee Street: P.O. Box 22001

State: New York

City: Albany

Zip Code: 12201-2001

For bond amounts of \$75,000 and \$125,000, the financial statement section must be completed.

Producer Information

Agency Name: C&M First Services, Inc.

Broker Name: _____

Agent Name: _____

Agent Email: _____

Agent Phone: _____

Applicant Information

Business Name/DBA: _____

Years in Business: _____

FEIN/Taxpayer ID: _____

Business Address

Street: _____

City: _____

State: NY Zip Code: _____

Contact Name: _____

Business Email: _____

Phone: _____

Type of Organization: (CHECK ONE)

Sole Proprietor LLC

Number of Employees: _____

Corporation Partnership

Payable Wage Hours/Week: _____

Owner 1 Legal Name: _____

% of Ownership: _____

Marital Status: (CHECK ONE)

SSN: _____

Net Worth: _____

Single: _____

Home Address Street: _____

State: _____

Married: _____

City: _____

Zip Code: _____

Legal Partner: _____

Email: _____

Phone: _____

Spouse's Name: _____

Email: _____

Phone: _____

Owner 2 Information: Use Owner 2 as Co-Signer on the Indemnity Agreement? YES NO

Name: _____ % of Ownership: _____

SSN: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Co-Signer information: (Co-Signer can be used to qualify for a better price based on Credit Score)

Name: _____

SSN: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Background Questions

Have you, or any partner affiliated with you, ever been convicted of, plead guilty, or no contest to a felony or a misdemeanor involving dishonesty or breach of trust? (Y/N): _____

If Yes, please provide additional details below:

Have you, or any partner affiliated with you, ever filed for bankruptcy? (Y/N): _____

If Yes, please provide additional details below:

Have you, or any partner affiliated with you, ever been party to a bond claim? (Y/N): _____

If Yes, please provide additional details below:

Have you, or any partner affiliated with you, ever committed a violation of state law? (Y/N): _____

If Yes, please provide additional details below:

Has your business entity, owner, or any partner affiliated with you been named or involved in any unpaid wage disputes reported to a local or state board? (Y/N): _____

If Yes, please provide additional details below:

NOTICE: The undersigned individual(s) hereby gives consent to Universal Fire Casualty Company and its 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.

Applicant Signature

Date

Co-Applicant Signature

Date

Confidentiality

As part of our due diligence efforts, Universal Fire & Casualty Insurance Company requests social security numbers to perform background checks. Universal Fire & Casualty utilizes a third party vendor to perform background check inquiries and does not share or use an individual's social security number with any other party or for any other reason.

Indemnity Agreement

This agreement is entered into by and between the undersigned applicant or applicants and/or indemnitors, (the "Undersigned") and Universal Fire & Casualty Insurance Company ("Company"):

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, as may be required, 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 or until Company is legally discharged of all bond liability thereunder. It is further agreed and understood that the first year's premium is FULLY EARNED UPON issuance AND IS NOT REFUNDABLE.

The Undersigned, jointly and severally, 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 expense 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 by reason of the said Company having become surety on said bonds.

The Undersigned hereby agrees immediately notify Company of any claim relating to bonds and 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 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 judgement against said Company.

If the Company shall set up a reserve to cover any claim, suit or judgement under any such bonds, the Undersigned will, immediately upon demand, deposit with the Company a sum of money equal to such reserve, such sum to be held by the Company as collateral security on such bonds, and such sum and any other money or property which shall have been, or shall hereafter be, pledged as collateral security on any such bond shall, unless otherwise agreed in writing by the Company, be available, in the discretion of the Company, as collateral security on any other bonds coming within the scope of this Agreement.

It is further agreed that the terms and conditions of this application shall also apply to increases and/or decreases in the amount of any and all bonds and shall also apply to all renewals whether the bond is continuous, renewed by Continuation Certificate or by the filing of any new bond on behalf of Undersigned.

This Agreement shall constitute both a Security Agreement to the Company and a Financing Statement, in accordance with the provisions of the Uniform Commercial Code of every jurisdiction wherein such Code is in effect. This Agreement shall, if recorded, constitute a consensual lien upon any and all real estate owned by the Undersigned at the time of such recording. However, the filing or recording of this Agreement shall be solely at the option of the Company, and the failure to do so shall not release or impair any of the obligations of the Undersigned under this Agreement or otherwise arising, nor shall such failure be in any manner in derogation of the rights of the Company under this Agreement or otherwise. The use of this Agreement as a Security Agreement, Financing Statement or consensual lien shall in no way abrogate, restrict or limit the rights of the Company under the Agreement or at law or in equity. The Undersigned waive all right to claim any property, including homestead, as exempt from levy, execution, sale or other legal process.

The Company shall have the right, and is hereby authorized, but not required to fill up any blanks left herein, and to correct any errors in the description of any of said bonds, or in said premium or premiums, or in any name or names, it being agreed that such insertion or corrections, when so made, shall be prima facie correct. This application shall be liberally construed so as to fully protect and indemnify the Company, its successors, assigns and reinsurers. The Undersigned appoints any officer of the Company, as the attorney in fact of the Undersigned with full right to execute on behalf of the Undersigned any document necessary to carry into effect the intent and purposes of this Agreement.

Facsimile and digital copies of this document or their signature(s) thereon, shall be deemed to be an original and/or original signature(s) for all purposes.

Undersigned submit to and agree this Agreement and its interpretation and performance shall be governed by the laws of the State of Michigan without regard to conflicts of law's provisions herein. The Undersigned waive their rights to a trial by jury in any action, proceeding or counterclaim arising out of this Contract.

The undersigned individual(s) hereby gives consent to Universal Fire & Casualty Company and its 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.

This Agreement may only be modified, in writing, by a rider signed by an officer of Company.

Individual Indemnification:

Indemnitor Signature	Indemnitor Name	Title	Date
Co-Signer Signature	Indemnitor Name	Title	Date

Company Indemnification: ON BEHALF OF UNDERSIGNED _____ (Company Name)

***By signing as Authorized Signatory, I hereby warrant that I am authorized to bind the Company to this Agreement.**

Indemnitor Signature	Indemnitor Name	Title	Date
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Financial Statement for Bond Amounts \$75k and \$125k

Personal _____ Financial Statement of _____ as of _____
 Business _____ Name _____ Date _____

	AMOUNTS		AMOUNTS
CURRENT ASSETS		CURRENT LIABILITIES	
Cash on Hand	_____	Notes Payable	_____
Cash in Bank(s) (Schedule A)	_____	(a) To Banks Regular	_____
Stocks, Bonds, etc. (Schedule B)	_____	(b) To Others	_____
IRA / Retirement Accounts	_____		
Accounts Receivable	_____	Accounts Payable	_____
Notes Receivable	_____	(a) Current	_____
Supplies	_____	(b) Past Due	_____
Other Current Assets	_____		
TOTAL CURRENT ASSETS: \$	_____	TOTAL CURRENT LIABILITIES: \$	_____
FIXED ASSETS		LONG TERM LIABILITIES	
Equipment at Book Value	_____	Equipment	_____
Real Estate- Business (Schedule C)	_____	Real Estate- Business (Schedule C)	_____
Real Estate- Homestead (Schedule C)	_____	Real Estate- Homestead (Schedule C)	_____
Real Estate- Investment (Schedule C)	_____	Real Estate- Investment (Schedule C)	_____
All Other Assets (explain fully):	_____	All Other Liabilities (explain fully):	_____
(a) _____	_____	(a) _____	_____
(b) _____	_____	(b) _____	_____
TOTAL FIXED ASSETS: \$	_____	TOTAL LONG TERM LIABILITIES: \$	_____
TOTAL ASSETS: \$	_____	TOTAL LIABILITIES: \$	_____
		Capital Stock (Paid In)	_____
		Net Worth	_____
		TOTAL LIABILITIES AND NET WORTH:	_____

SCHEDULE A - CASH

Name of Bank	Location	Amount on Deposit

SCHEDULE B - STOCKS, BONDS, ETC.

Name of Security	No. of Shares	Par Value	Market Value	Dividends Paid Past Two Years	If Any Pledged, State to Whom and for what Purpose

SCHEDULE C - REAL ESTATE

Location and Description of Property	Name on Title	Monthly Revenue	Present Forced Sale Value	Amount of Mortgage

Assets of a trust listed on this statement need to be specifically described as part of a trust or they will be considered a part of this statement and in the event of a claim will be subject to the Indemnity obligations described herein.