

## Fidelity and Surety Bond Agency

### Sub-Division & Site Improvement Bond

1. Questionnaire
2. Bond Information Sheet
3. Most Current Fiscal Year-End Financial Statement
4. Most Current Owner (s) Personal Financial Statement (s)
5. Copy of Entity Documents: Articles of Incorporation, Partnership Agreement, Joint Venture
6. Company Brochure, Resumes of Owners/Principals, Key Personnel
7. Set-Aside Letter from Construction Lender
8. Sub-Division Agreements(s)
9. Obligee's Bond Form
10. Engineer's Estimate of Costs to Complete Improvements
11. Map showing location of subject property
12. Copy of Current Certificate of Insurance

# QUESTIONNAIRE

1) Name of Company \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Federal Tax ID. # \_\_\_\_\_  
 E-Mail \_\_\_\_\_ Website \_\_\_\_\_

Type of Organization (check one) Corp.  S-Corp.  Partnership  Proprietorship  LLC.

2) Principals of the Company:

NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ( )
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ( )
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ( )
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No

Do any of the Indemnitors participate and/or have any assets in a Trust of any kind?  Yes  No *If Yes, please attach a copy of the Trust.*

4) Year business started \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ State \_\_\_\_\_

5) Include prior and/or current projects *if extensive, please attach a separate sheet*

	Name and Location of Tract	Year Started	No. of Lots	Amt. of Improvements	Bond Company	Date or % Completed
A.				\$		
B.				\$		
C.				\$		

	Name of Lender (For Tracts Listed Above)	Loan Officer	Phone No.
A.			
B.			
C.			

6)	Name of Accountant	Fiscal Yr. End	Phone No.

	Name of Bank and Address	Account#	No. of Years with Bank.
A.			
B.			

	Name of Banker	Phone No.	Line of Credit Amount?
A.			\$
B.			\$

- 7) Have you, your partner(s), your company or any officer in your company:
- A. Failed to complete a project.....  Yes  No
  - B. Failed in a business.....  Yes  No
  - C. Filed personal or business bankruptcy.....  Yes  No
- 8) Has any Surety ever declined to furnish you or your company a Bond?.....  Yes  No
- 9) Have you had any Surety Bond Claims?.....  Yes  No
- 10) Have you had any Lawsuits or Judgments within the last two years?.....  Yes  No

**If answered Yes to any part of questions 7, 8, 9 or 10, please attach explanation.**

11) Have any Liens been filed against projects you have been involved with developing during the past two years?  
 Yes  No. *If Yes, please complete.*

Date	Amount	By Whom	Date Released	Reasons & Details
	\$			
	\$			
	\$			

**I/WE HEREBY AUTHORIZE THE INSURANCE COMPANY TO CONTACT CREDIT SOURCES TO VERIFY CREDIT INFORMATION FOR THE COMPANY AND/OR OWNER'S OF SAID COMPANY.**

**X** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Signature* *Print Name* *Date*

# BOND INFORMATION SHEET

Developer: \_\_\_\_\_  
 Subdivision Name: \_\_\_\_\_ Type of Product: \_\_\_\_\_  
 Describe Location: \_\_\_\_\_

Tract Number: \_\_\_\_\_ Number of Units: \_\_\_\_\_  
 Selling Price of Units: \$ \_\_\_\_\_ To \$ \_\_\_\_\_  
 Square Feet of Units: \_\_\_\_\_ To \_\_\_\_\_

Construction Lender: \_\_\_\_\_ Loan Officer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Amount of Construction Loan: \$ \_\_\_\_\_

Amount Allocated for Off-Site Improvements: \$ \_\_\_\_\_

Is a Set-Aside Letter Available  Yes  No

Cost of Land: \$ \_\_\_\_\_

When Purchased: \_\_\_\_\_

How Much Owed: \_\_\_\_\_

Name of General Contractor: \_\_\_\_\_

Improvements	Cost	Name of Subcontractor (If applicable)
Excav., Grading, Clearing	\$ _____	_____
Engineering	\$ _____	_____
Streets, Curbs, Gutters	\$ _____	_____
Water	\$ _____	_____
Sewers	\$ _____	_____
Utilities	\$ _____	_____
Other	\$ _____	_____

Obligee (Municipality Requiring Bonds): \_\_\_\_\_

Address of Obligee: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Bond	Performance	Labor & Materials
Grading Improvements	\$ _____	\$ _____
Street Improvements	\$ _____	\$ _____
Water Improvements	\$ _____	\$ _____
Storm Drain Improvements	\$ _____	\$ _____
Monument	\$ _____	\$ _____
Maint. Guarantee	\$ _____	\$ _____
Property Tax	\$ _____	\$ _____
Other	\$ _____	\$ _____