

**HILL & USHER™ - LICENSE BONDS**

**UNIVERSAL APPLICATION FOR CONTRACTORS LICENSE BOND (06/07)**

**Applicant** Name (Exactly as it should appear on bond): \_\_\_\_\_

Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax Telephone: \_\_\_\_\_ Mobile Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

Business Entity:     Individual     Corporation     Partnership     LLC

Federal Employers I.D. #: \_\_\_\_\_ Date Firm Established: \_\_\_\_\_ # of Owners: \_\_\_\_\_

**BOND UNDERWRITING INFORMATION**

1. Nature of **Applicant's** business: \_\_\_\_\_

2. Personal information must be completed on all owners, members, partners or corporate owner:

Individual Name		Social Security No.	% of Ownership	Date of Birth
Spouse's Name		Social Security No.	Date of Birth	Home Phone #
Spouse's Employer	Employer Phone Number	Length of Employment		
Home Address	City	State	Zipcode	

Individual Name		Social Security No.	% of Ownership	Date of Birth
Spouse's Name		Social Security No.	Date of Birth	Home Phone #
Spouse's Employer	Employer Phone Number	Length of Employment		
Home Address	City	State	Zipcode	

Individual Name		Social Security No.	% of Ownership	Date of Birth
Spouses Name		Social Security No.	Date of Birth	Home Phone #
Spouse's Employer	Employer Phone Number	Length of Employment		
Home Address	City	State	Zipcode	

**BOND INFORMATION**

1. Effective Date of Bond: \_\_\_\_\_
2. Contractors License Bond Term  
 1 Year       2 Year       3 Year
3. License Class Code: \_\_\_\_\_
4. Bond Amount Required: (\$) \_\_\_\_\_
5. Previous Bonding Company \_\_\_\_\_
6. Any prior losses with another bonding/surety company?       Yes       No
7. Any owner, partner, or corporate owner listed above delinquent on any State or Federal taxes?  
 Yes       No
8. Has any owner, member, partner or corporate owner ever had a Contractor's license bond revoked?  
 Yes       No
9. Reason for Changing Bonding Company \_\_\_\_\_