



\$10,000.00 CONTRACTORS LICENSE BOND APPLICATION

These rates do not apply to Roofers, Swimming Pool Contractors or Disciplinary Bonds*
 COMPLETE THE FOLLOWING: 1 YEAR \$93.00 2 YEARS \$156.00 3 YEARS \$207.00 (O.A.C.)

NAME (MUST BE EXACTLY AS IT APPEARS ON YOUR POCKET LICENSE OR LICENSE APPLICATION)				<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP
				<input type="checkbox"/> CORPORATION	<input type="checkbox"/> RME / RMO
STREET ADDRESS		CITY	STATE	ZIP	PHONE:
MAILING ADDRESS (IF DIFFERENT)		CITY	STATE	ZIP	FAX:
LICENSE NUMBER	LICENSE CLASS	NOTE: IF YOU ARE A NEW CONTRACTOR, ATTACH A COPY OF THE LETTER FROM THE LICENSE BOARD ADVISING THAT YOU PASSED THE EXAM.			REQUESTED EFFECTIVE DATE
IF RME / RMO (BOND OF QUALIFYING INDIVIDUAL) COMPLETE THE FOLLOWING					
NAME OF FIRM ON LICENSE		ADDRESS		CITY	STATE ZIP

INDEMNITY AGREEMENT – READ CAREFULLY AND SIGN

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned the undersigned individually hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally as follows:

1. To reimburse American Contractors Indemnity Company (“Surety”), upon demand for all payments made for, and to indemnify Surety from:
 - a) all loss, contingent loss, liability and contingent liability, claim, expense, including attorneys’ fees, for which the Surety shall become liable or shall become contingently liable by reason of such suretyship, whether or not Surety shall have paid same at the time of demand; and
 - b) to pay Surety an advance premium for the first year or a fractional part thereof that is fully earned and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the oblige.
 - c) Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned
2. Surety and undersigned agree that the place of performance of this agreement including the promise to pay Surety, shall be in Los Angeles County, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles County, California.
3. Surety is authorized to investigate, at any time, the undersigned’s credit, employment history and department of motor vehicle records. Privacy Notice: All nonpublic personal information gathered pursuant to the application shall not be disclosed except as permitted by law.

Regardless of the date of signature, this indemnity is effective as the date of execution of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).

FIRST YEAR’S PREMIUM OR \$100.00 MINIMUM PREMIUM, WHICHEVER IS GREATER, IS FULLY EARNED UPON ISSUANCE.

DATE: _____

INDIVIDUAL SIGNATURE AND DATE BELOW	PRINTED NAME	SOC.SEC. #	DRIVERS LIC. #
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If Partnership – Sign Below

SIGNATURE AND DATE - PARTNER & INDIVIDUAL LY	PRINTED NAME	SOC.SEC. #	DRIVERS LIC. #
SIGNATURE AND DATE - PARTNER & INDIVIDUAL LY	PRINTED NAME	SOC.SEC. #	DRIVERS LIC. #

If Corporation – Sign Below

SIGNATURE AND DATE - PRESIDENT & INDIVIDUALLY	PRINTED NAME	SOC.SEC. #	DRIVERS LIC. #
WITNESS	PRINTED NAME		

*Complete the “Multi-App” if bond is for Swimming Pool Contractor, Roofing Contractor or Contractor applying for Disciplinary Bond.

AGENT INFORMATION
Name: PREFERRED BONDING & INS. SERVICES Phone: (323) 663 – 7814 Fax: (323) 663 – 7834 ACIC PRODUCER NO. 3057 Address: 1800 McCollum Street City: Los Angeles State: California Zip: 90026