

# Surety Bond Brokers of Louisiana, Inc.

## SURETY QUESTIONNAIRE

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TEL NO. \_\_\_\_\_ FAX NO. \_\_\_\_\_

PRINCIPAL \_\_\_\_\_

TAX ID NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TEL NO. \_\_\_\_\_

FAX NO. \_\_\_\_\_

1. State whether a Corporation, Partnership or Proprietorship \_\_\_\_\_
2. Date operations started: \_\_\_\_\_ Date/State Incorporated \_\_\_\_\_
3. Desired Work Program: Single Job: \_\_\_\_\_ Total Aggregate \_\_\_\_\_
4. Type of Business/Work performed \_\_\_\_\_
5. Previous Surety/Tel No. \_\_\_\_\_
6. List Owners-Spouses:

	SOCIAL SECURITY		% OF
INDIVIDUAL	NUMBER	TITLE	OWNERSHIP
NAME _____			
SPOUSE _____			
ADDRESS _____			

NAME \_\_\_\_\_  
SPOUSE \_\_\_\_\_  
ADDRESS \_\_\_\_\_

NAME \_\_\_\_\_  
SPOUSE \_\_\_\_\_  
ADDRESS \_\_\_\_\_

7. Largest contracts completed within past 3 years:

OBLIGEE AND ADDRESS	PHONE NUMBER	CONTRACT AMOUNT	IF BONDED, WITH WHOM	DATE COMPLETED

8. Has this organization or has any organization in which any officer or partner been associated ever failed to complete any contract or made a compromise with creditors or filed or been declared bankrupt? If yet, attach full details.      Yes       No

- 8A. Are you or have you been involved in any law suites, divorce actions or any other form of court Litigation? If yes, attach full details      Yes       No

# Surety Bond Brokers of Louisiana, Inc.

9. In what other lines of business are officers or partners financially interested? Give details below.

\_\_\_\_\_

10. Include resumes or use attached format for all owners/key personnel.

11. List life insurance policies payable to organization:

\_\_\_\_\_

12. Prime suppliers

NAME	FULL ADDRESS	PHONE NO.

13. List name, address, and telephone number of other references such as Architects, Engineers, Owners, General Contractors and attach copies of reference letters, if any.

NAME	FULL ADDRESS	PHONE NO.

14. At what bank(s) do you have an account? Give account number, bank name, address, telephone number and officer handling account. Attach copy of bank letter using enclosed format.

\_\_\_\_\_

15. Attach three fiscal year end statements. Note: If the most current statements are nine (9) months or more old, then a six (6) month statement must be included. Also, complete and attach form "Status of Uncompleted Contracts."

16. Attach current personal financial statement(s) for Owner, Partners, or major Stockholders, (as applicable) – form attached.

The undersigned hereby authorizes and requests any or all depositories or banks in which funds of the undersigned may be deposited or from which monies may be borrowed, to advise Atlantic Underwriting whenever requested, the amount of such deposits and/or loans, as well as the status of same, and any depository, bank, material man, supply house or other person, firm or corporation is hereby authorized to furnish to Atlantic Underwriting, whenever requested, any information concerning any transaction or anticipated transaction with the undersigned.

(Name of company here) \_\_\_\_\_

Dated this \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
(If corporation, sign and seal here)

\_\_\_\_\_  
(Witness sign here if applicant is not incorporated)

\_\_\_\_\_  
(Signature of applicant if not a corporation)