



A Division of Frankenmuth Insurance

Judicial / Court Commercial Bond Application

Type of Bond: _____
(Attach a copy of the bond form, if available)

Agency (required): _____

Agent Name: _____

Agency City: _____ Agency State: _____

Bond Amount: \$ _____ Effective Date of Bond: _____ Bond Term, if known: _____
of years

Applicant is: (select one) Individual Partnership C-Corp S-Corp LLC _____

Applicant (Principal): _____

Applicant's Home Address: _____

Applicant's Business Address: _____

Applicant's Business Description: _____

Number of Years in Business: _____ SS#: _____ Fed Tax ID: _____

U.S. Citizen? No Yes Business Phone: _____ Fax No.: _____

Email: _____

- Does the Applicant have any other Surety bonds in force with any other Surety company? Yes No
- Has another Surety company declined to write this or any previous bond? Yes No
- Have you ever had a bond involuntarily terminated or cancelled? Yes No
- Has there ever been a claim or legal action against any bond executed on your behalf? Yes No
- Do you or any of your companies have any pending lawsuits, unsatisfied judgments or liens? Yes No
- Have you or any of your companies declared bankruptcy or become insolvent? Yes No
- Have you or any of your companies been the subject of any legal or administrative proceedings resulting
in disciplinary action? Yes No
- Have you ever been convicted of a felony? Yes No

Judgment / Claim Amount: _____

Type of Action: _____

Case Number: _____ Court Jurisdiction: _____

Attorney's Name & Address: _____

Summary of the Action: _____

Does the case involve a domestic dispute? Yes No

Copy of Court Order, Judgment(s), or other supporting documents should be attached to application.

Statement of Financial Condition (Business or Personal)

Cash	\$	_____	Unsecured Debt	\$	_____
Marketable Securities	\$	_____	Current Bills Due	\$	_____
Real Estate	\$	_____	Real Estate Mortgages	\$	_____
Cash Value of Life Ins.	\$	_____	Secured Debt	\$	_____
Business Ventures	\$	_____	(other than real estate)		_____
Note Receivable	\$	_____	Taxes Payable	\$	_____
Personal Property	\$	_____	Other Debt	\$	_____
Automobiles	\$	_____	TOTAL LIABILITIES	\$	_____
Other Assets	\$	_____			
TOTAL ASSETS	\$	_____	NET WORTH	\$	_____

Application Completed By:

Date:

Signature

Print Name & Title

The applicant and indemnitors hereby request Frankenmuth Mutual Insurance Company and any affiliated company, their successors, or assigns to become their surety. The undersigned hereby certify the truth of all statements in the application, authorize the Company to verify this information at the time of application and as needed, on an ongoing basis and to obtain additional information from any source, including obtaining credit reports at the time of application, in any review or renewal, at the time of any potential or actual claim, or for any other legitimate purposes as determined by the Company in its reasonable discretion. Upon approval of any bond(s), the applicants and indemnitors will receive an e-mail with instructions on how to execute an indemnity agreement through an e-signature process, including instructions on how to review the indemnification agreement prior to execution.

Please speak with your agent for additional details.