

Date: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Entity: (circle) Corporation                      Partnership                      Proprietorship                      LLC

Contractor: \_\_\_\_\_

(Legal name as registered with the State)

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

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

Mailing Address (if different): \_\_\_\_\_

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

Federal Tax ID Number: \_\_\_\_\_ Date Business Formed: \_\_\_\_\_

Date Incorporated: \_\_\_\_\_

Recent ownership changes or plans to change ownership structure: \_\_\_\_\_

What type of construction does the business specialize / trades performed? \_\_\_\_\_

What percentage of a project does the business self-perform? \_\_\_\_\_

Ownership Information:

Name	Age	Position	Ownership %	SSN
_____	_____	_____	_____	_____
(Spouse)	_____	_____	_____	_____
_____	_____	_____	_____	_____
(Spouse)	_____	_____	_____	_____
_____	_____	_____	_____	_____
(Spouse)	_____	_____	_____	_____

• *Key Personnel:*

Name	Age	Position	Years Employed	Comments
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total # of employees: \_\_\_\_\_ Number of full-time office staff: \_\_\_\_\_

Affiliated Companies: \_\_\_\_\_  
 \_\_\_\_\_

Insurance Agency: \_\_\_\_\_

Insurance Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

• *Work History:*

Job Description	Year Complete	Contract \$	Contact Person
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Normal Operating Territory: \_\_\_\_\_

Largest backlog of work: \$ \_\_\_\_\_ Number of projects: \_\_\_\_\_

What single size project are you looking to bond? \$ \_\_\_\_\_

What size backlog aggregate are you anticipating? \$ \_\_\_\_\_ Number of backlog jobs: \_\_\_\_\_



- *Legal:*

Attorney: \_\_\_\_\_ Telephone: \_\_\_\_\_

Any current contract disputes? \_\_\_\_\_

Any material liens? \_\_\_\_\_

Any labor liens? \_\_\_\_\_

Any lawsuits? \_\_\_\_\_

We warrant the information contained in this application related to Surety Bonding to be true and correct for the assessment of Surety Credit. I authorize AFSB LLC to share this information with appropriate Surety Personnel in order to assess Surety Credit.

Company: \_\_\_\_\_

By: \_\_\_\_\_

Signature

\_\_\_\_\_  
Name and title

Date: \_\_\_\_\_

## Credit Release Authorization:

I / we authorize AFSB LLC to investigate the information contained with the contractors application, my / our credit with any and all creditors and / or financial and or lending institutions, and prior Surety Credit.

Company: \_\_\_\_\_

By: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Name and title

Date: \_\_\_\_\_