

Contractor's Bond Kit

Thank you for allowing The Surety Group to consider your account for bonding. Following is a list of items needed to get you set up for bid, payment and performance bonds. Please be sure to complete all forms to the best of your ability and to provide us with as much information as possible. Do not hesitate to contact us with any questions or concerns. We look forward to finding solutions to all of your future bonding needs.

12890 Lebanon Road
Mt. Juliet, TN 37122
844-432-6637
404-351-3237 (F)
www.suretygroup.com
info@suretygroup.com

Financial Statements

Please provide copies of the company's CPA prepared fiscal year-end financial statements for the **last 3 years**.

- ✓ The statements must be prepared by a Certified Public Accountant (CPA) and prepared using the percentage of completion method of accounting.
- ✓ If your company is new or has recently incorporated, please have your CPA prepare an opening statement.
- ✓ If your statement is more than six months old, please include an interim statement not more than 90 days old.

Forms to Complete

Please complete the following forms to the best of your ability. To avoid underwriting delays, please be sure to complete all necessary forms.

Business Information

- ✓ Contractor's Questionnaire
- ✓ Personal Financial Statement--*All owners, partners, stockholders or members must provide a personal financial statement.*
- ✓ Business Plan
- ✓ Resume--*All owners, partners, stockholders or members and key personnel must provide a resume.*
- ✓ Indemnity Agreement Information
- ✓ Work on Hand

References

- ✓ Bank Reference Letter—*Please have your bank representative complete this form.*
- ✓ Previous Jobs Reference Letter—*Please have a representative from your **3 largest projects** complete this form.*
- ✓ Supplier Reference Letter—*Please have a representative from your **3 prime suppliers** complete this form.*

Bond Request Forms

- ✓ Bid Bond Request Form—*Please complete the form only if you have a current bid bond request.*
- ✓ Payment and Performance Bond Request Form—*Please complete this form only if you have a current payment and performance bond request.*
- ✓ Job Cost Breakdown—*Please complete this form to accompany any bond request.*

Other Items Needed

Please provide us with the following additional items.

Tax Returns

- ✓ Corporate Tax Returns for the **Last 3 Years**. If you have filed an extension for this year, please provide us with a copy of the extension.
- ✓ Personal Tax Returns for the **Last 3 Years**. All owners, partners, stockholders or members must submit their tax returns. If you have filed an extension for this year, please provide us with a copy of the extension.

Current Certificate of Insurance

- ✓ Please provide a certificate of commercial coverage.

As sufficient time is need to carefully consider all aspects of your submission, the more information you can provide, the sooner a decision can be made. Please be sure to pay close attention to all forms as any incomplete or incorrect forms will results in underwriting delays. Should you have any questions or concerns, please do not hesitate to contact our agency.

Business Plan

Name of Business: _____

Business Address: _____

Year Business Started: _____

Year of Incorporation: _____

Original Number of Employees: _____

Current Number of Employees: _____

Sales Volume First Year: _____

Sales for Latest Year: _____

What exactly does your business do? _____

In the event of injury, who would run your business: _____

Do you have life insurance? Yes No

If yes, How Much? _____

Is the life insurance payable to the business? Yes No

Do you have enough to cover all your outstanding work on hand? Yes No

How much life insurance do you have for your family? _____

Name and position of relatives that work for the business:

Give a description of management experience and continuity provisions you have for your business.

What will happen when you retire?

Outline your business goals for the next 12 months.

Bid Bond Request Form



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Please include the following items with your bid bond request:

- ✓ Job Cost Breakdown
- ✓ Invitation to Bid/ Solicitation including any Bond Forms
- ✓ Current Work on Hand

Principal: _____

Bid Date: _____ Time: _____

Obligee: _____

Obligee's Complete Address: _____

Job Description: _____

Project Location: _____

Street *City* *County* *State* *Zip*

Estimated Bid Amount: _____ Invitation #: _____

Bid % of Bid Guarantee Amount: 5% 10% 20% Other: _____

Time to Complete: _____ Liquidated Damages: _____

Estimated Start Date: _____ Estimated Completion Date: _____

Percentage Subbed: _____ Trades Subbed: _____

Maintenance Period: _____ Uncompleted Work on Hand: _____

Payment and Performance Bond Requirement if other than 100%: _____

Does the Obligee have their own bond form? Yes No **If yes, please provide forms.**

Does the Obligee have special requirements pertaining to the surety company (e.g., Best Rating or T-Listing)?

Mode of Delivery: Mail Pick Up FedEx UPS Other: _____

Account # for Express Mail Service: _____

I have carefully reviewed my bid specifications and bond requirements and the above information is correct. I will also provide the bid results by name of bidder and their amount immediately following the bid opening.

Principal Signature

Date



Bank Reference Letter

This form is to be completed by an authorized representative of the bank; the signature must be notarized.

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Principal Name (Business): _____

Complete Address: _____

Bank Name: _____

Bank Address: _____

Name & Title of Authorized Bank Representative: _____

Phone: _____ Fax: _____

Disclosures About the Bank's Relationship with the Above Named Principal

Opening Date of Operating Account(s): _____

Current Year's Average Balance: _____ Past Year's Average Balance: _____

Savings Account(s)? Yes No Present Balance of Savings Account(s): _____

Line of Credit

Line of Credit Established? Yes No Date Line of Credit Opened: _____

Amount (Maximum High Credit): _____ Present Balance (In Use): _____

Secured? Yes No Collateral: _____

Expiration Date: _____

Installment Loans

Present Total Balance of Installment Loans Outstanding: _____

Total Paid Per Month: _____ Maximum Term Of Indebtedness: _____

Secured? Yes No Collateral: _____

Principal Information

Is Principal Co-Endorser for Others: Yes No

If yes, for Whom?: _____ Amount: _____

Does bank know of any contingent liabilities facing Principal? _____

Any liens filed, judgments, suites or claims pending? _____

Does the bank have current financial information about the Principal? _____

Does the bank of knowledge of the Principal's key personnel? _____

Banks opinion of the Principal: _____

I hereby certify that all the information presented herein is complete and accurate to the best of my knowledge.

Signature of Authorized Bank Representative: _____ Date: _____

State of _____ County of _____

This is to certify that _____, having the position of _____
and as an authorized representative of _____; has
made above disclosures about the bank's relationship with the above named principal.

Notary's signature: _____ Date: _____

Commission Ending Date: _____ (Seal)

Fast Track Bond Application

12890 Lebanon Road
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404-351-3237 (F)
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info@suretygroup.com

Business Information

Business Name: _____
Please provide exact business name to be listed on your bond

Business Address: _____
Please list FULL address to be listed on your bond

Sole Proprietorship Partnership S Corp C Corp LLC EIN: _____

Work Phone: _____ Cell Phone: _____

Alternate Phone: _____ Fax Number: _____

E-mail Address: _____ Website: _____

Company Specialty: _____

Subsidiaries or Affiliates: _____

Effective Date of Business: _____ Approx. Business Net Worth: _____

Year of Incorporation: _____ State of Incorporation: _____

Owner Information *Please list all owners, partners, stockholders and/or members.*

Name: _____ SSN: _____

Home Address: _____

Title: _____ % of Ownership: _____

Spouse's Name: _____ Spouse's SSN: _____

Personal Net Worth: _____ Do you own Real Estate? Yes No

Are any of your assets in trust? _____

Name: _____ SSN: _____

Home Address: _____

Title: _____ % of Ownership: _____

Spouse's Name: _____ Spouse's SSN: _____

Personal Net Worth: _____ Do you own Real Estate? Yes No

Are any of your assets in trust? _____

Bond Request Information

Bond Type: Bid Bond Payment and Performance Bond

Bid Date: _____ Bid/Contract Amount: _____

Maintenance Period: _____ Time to Complete: _____

Liquidated Damages: _____ Anticipated Start/End Date: _____

Obligee/Owner: _____

Obligee Address: _____

Job Description: _____

Amount Subcontracted: _____ Amount of Materials: _____

✓ **If bid, please provide bid results.**

✓ **Please provide a copy of the contract or solicitation/invitation to bid to include any specific bond forms.**

If your contract or bid amount is \$50,000 or under, please skip to the signature section.

Key Employees *Please list three key employees (estimators, project managers, etc.)*

Name/Title: _____ Years of Experience: _____

Name/Title: _____

Years of Experience: _____

Name/Title: _____

Years of Experience: _____

Largest Contracts *Please list the 3 largest contracts completed within the last 5 years*

Contract Amount: _____

Project Title: _____

Obligee & Contact Information: _____

Year Completed: _____

Gross Profit: _____

Contract Amount: _____

Project Title: _____

Obligee & Contact Information: _____

Year Completed: _____

Gross Profit: _____

Contract Amount: _____

Project Title: _____

Obligee & Contact Information: _____

Year Completed: _____

Gross Profit: _____

Current Contracts *Please list the 2 largest projects you currently have underway*

Contract Amount: _____

Project Title: _____

Obligee & Contact Information: _____

Estimated Completion Date: _____

% Complete: _____

Contract Amount: _____

Project Title: _____

Obligee & Contact Information: _____

Estimated Completion Date: _____

% Complete: _____

Major Suppliers *Please list 3 major suppliers with whom you've done business within the last year*

Name: _____

Contact Information: _____

Amount Owed: _____

% Over 60 Days: _____

Name: _____

Contact Information: _____

Amount Owed: _____

% Over 60 Days: _____

Name: _____

Contact Information: _____

Amount Owed: _____

% Over 60 Days: _____

Architects/Engineers *Please list architects and/or Engineers familiar with your work*

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

Bank Information

Bank Name: _____

Contact Name/Number: _____

Line of Credit Amount: _____

Available Balance: _____

Company Information

Trades Performed In-House: _____

Trades Subcontracted: _____

% of Work is Labor: _____ Material: _____

% Subcontracted: _____

Do you have adequate equipment? Yes No

Equipment Owned or Leased? _____

Territory: _____

Largest Work on Hand in the Past: _____

Year/ Number of Jobs: _____

Average Job Size: _____

Average Work on Hand: _____

Bonding Capacity Desired~ Single Project: _____ Total Work Program: _____

Attorney Name & Contact Information: _____

Accountant's Name & Contact Information: _____

Basis of Financial Statement: Cash Accrual % of Completion Fiscal Year End: _____

Liability Insurance Company: _____

Agent Name & Contact Information: _____

Signature Section Please answer the following questions and sign where indicated

Disputes, Financials Difficulties, Problems, Etc.

	Company		Owners, Officer, Partner	
Failed in business or declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Failed to complete a job or been assessed with delay damages?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been in a claim with a Surety?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been involved in any lawsuits in the last 5 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been involved in any disputes in the last 5 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been delinquent in payment of any taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have any corporate or personal assets in trust or escrow?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any business or personal assets restricted or pledged?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bonded or declined for bonding in the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please explain any "YES" answers fully below or attach explanation

There have or have not been **IMPORTANT CHANGES*** since the date of the last financial statement. If there have been **IMPORTANT CHANGES**, a copy of the last financial statement with notes explaining the **IMPORTANT CHANGES** must be attached and the notes must be signed by an owner or officer of the company.

***IMPORTANT CHANGES** that must be reported are changes exceeding 25% in the following categories: net worth, cash, accounts receivable, inventory, accounts payable, notes payable and taxes due.

Signatures

I acknowledge that all the information stated above is complete and correct and has been given to The Surety Group, Inc. for the purpose of underwriting a request for a surety bond. I understand that false information may constitute misrepresentation or fraud. I authorize The Surety Group, Inc. and/ or the insurance company to investigate credit, character, capacity and capital of the company, its employees and owners for bonding purposes.

Date: _____

Signature: _____

Printed Name & Title: _____

CONTRACTOR QUESTIONNAIRE

Name of Firm:				Fiscal Year End:
Address	City	State	Zipcode	Phone:
Contracting Specialty:		Contact Person:	Title:	Year Business Started:
Type of Business: <input type="checkbox"/> Corp <input type="checkbox"/> Part <input type="checkbox"/> Prop <input type="checkbox"/> Sub. S. Corp				
State of Incorporation:			Area of Incorporation:	
List the corporate officers, partners or proprietors of your firm:				
Name: _____ Birth Year _____ Position _____ %Owned _____ Spouse _____				
Name: _____ Birth Year _____ Position _____ %Owned _____ Spouse _____				
Name: _____ Birth Year _____ Position _____ %Owned _____ Spouse _____				
Name: _____ Birth Year _____ Position _____ %Owned _____ Spouse _____				
Will the above individuals and spouses personally indemnify Surety? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain: _____				
Is there a buy/sell agreement among the owners of the business? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this agreement funded by life insurance?: <input type="checkbox"/> Yes <input type="checkbox"/> No Corp. Indemnity? <input type="checkbox"/> Yes <input type="checkbox"/> No Cross/Corp Indemnity? <input type="checkbox"/> Yes <input type="checkbox"/> No				
How many people does your firm employ? _____ How many work crews? _____				
Has your firm or any of its principals ever petitioned for bankruptcy, failed in business or defaulted so as to cause a loss to a Surety? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain: _____				
Is your firm or any of its owners or officers currently involved in any litigation? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain: _____				
What percentage of the firm's work is normally for : Government Agencies? _____% Private Owners? _____% Percentage subcontracted? _____%				
Are bonds required of subs? <input type="checkbox"/> Yes <input type="checkbox"/> No				
What trades do you normally subcontract? _____				
What is largest amount of uncompleted work on hand at one time in the past? Amount:\$ _____ Year: _____				
What is the largest job you expect to do during the next year? \$ _____ What is the largest uncompleted work program expected during the next year? \$ _____ What is the largest uncompleted work program expected during the next year? \$ _____ What is your expected annual volume next year? \$ _____				
What trades do you normal undertake with your own forces? _____ SIC Code _____				
Do you lease equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type: _____				
What are the terms of the lease? _____				

Do you have a full time accountant on staff? Yes No **If yes, years experience:** _____

Provide the details of your CPA? Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

On what basis are taxes paid? Cash Completed Job Accrual % of Completion

On what basis are financial statements prepared? Cash Completed Job Accrual % of Completion

On what level of assurance are financial statements prepared? CPA Audit Review Compilation

How often are financial statements prepared? Annually Semi-Annually Quarterly Monthly

Are job cost records kept? Yes No. **How often reviewed?** _____ **How often updated?** _____

How often updated? _____ **Do they show job detail?** Yes No **Frequency?** _____

Name of bank? Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Amount of line of credit: \$ _____ **Expiration date:** _____ **What is interest rate?** _____%

UCC Filing Yes No **How is credit secured?** _____

Is your firm union? Yes No **What is firm's Dun & Bradstreet Number?** _____

D & B Rating: _____ **Pay Record:** _____ **Date of Rating:** _____

Remarks: _____

Previous Bonding Companies::

Name: _____ Reason for leaving: _____

Name: _____ Reason for leaving: _____

Name: _____ Reason for leaving: _____

List five or your largest contracts:

Job Name: _____ Contract Price _____ Gross Profit _____ Completed _____ Bonded? Yes No

Owner: _____ Design Professional: _____

Job Name: _____ Contract Price _____ Gross Profit _____ Completed _____ Bonded? Yes No

Owner: _____ Design Professional: _____

Job Name: _____ Contract Price _____ Gross Profit _____ Completed _____ Bonded? Yes No

Owner: _____ Design Professional: _____

Job Name: _____ Contract Price _____ Gross Profit _____ Completed _____ Bonded? Yes No

Owner: _____ Design Professional: _____

Job Name: _____ Contract Price _____ Gross Profit _____ Completed _____ Bonded? Yes No

Owner: _____ Design Professional: _____

List five of your major suppliers:?

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Contact: _____ Phone: _____

List five of your major suppliers?: (CONT')

Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Phone: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

List five subcontractors (or contractors if you are a subcontractor) that you do business with:

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Primary Contact: _____ Phone: _____

List three Architects you have done business with:

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

Name: _____ Job: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

List key personnel, foremen or supervisors:

Name: _____ Birth Year _____ Position _____ Yrs Exp. _____ Previous Emp. _____

Name: _____ Birth Year _____ Position _____ Yrs Exp. _____ Previous Emp. _____

Name: _____ Birth Year _____ Position _____ Yrs Exp. _____ Previous Emp. _____

Name: _____ Birth Year _____ Position _____ Yrs Exp. _____ Previous Emp. _____

Name: _____ Birth Year _____ Position _____ Yrs Exp. _____ Previous Emp. _____

List any life insurance in effect on key personnel:

Name: _____ Beneficiary _____ Amount \$ _____ Cash Value \$ _____

Insurance Company: _____

Name: _____ Beneficiary _____ Amount \$ _____ Cash Value \$ _____

Insurance Company: _____

Name: _____ Beneficiary _____ Amount \$ _____ Cash Value \$ _____

Insurance Company: _____

List other insurance coverage currently in effect: (Limits in "000's)

General Liability: Bi\$ _____ Paid:\$ _____ Carrier _____ Expires: _____

Auto Liability: Bi\$ _____ Paid:\$ _____ Carrier _____ Expires: _____

Umbrella: Bi\$ _____ Paid:\$ _____ Carrier _____ Expires: _____

Owner's Protection Bi\$ _____ Paid:\$ _____ Carrier _____ Expires: _____

List any subsidiaries and affiliates of the contracting firm:

Firm Name: _____ Ownership _____ Type of Bus. _____ NANDA Code _____

Firm Name: _____ Ownership _____ Type of Bus. _____ NANDA Code _____

Firm Name: _____ Ownership _____ Type of Bus. _____ NANDA Code _____

Firm Name: _____ Ownership _____ Type of Bus. _____ NANDA Code _____

Firm Name: _____ Ownership _____ Type of Bus. _____ NANDA Code _____

Additional Remarks:

Completed by: _____

Title: _____

Date: _____

Job Cost Breakdown

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404-351-3237 (F)
www.suretygroup.com
info@suretygroup.com

Principal: _____

Project Title: _____

Income and Expenses

Income

<u>Contract Revenue</u>	\$ _____	100	%
-------------------------	----------	-----	---

Expenses

<u>Contractors Labor</u>	\$ _____		%
--------------------------	----------	--	---

<u>Materials/Supplier</u>	\$ _____		%
---------------------------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

<u>Subcontractor Labor</u>	\$ _____		%
----------------------------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

_____	\$ _____		%
-------	----------	--	---

<u>Total from Attached Sheets</u>	\$ _____		%
-----------------------------------	----------	--	---

<u>Overhead</u>	\$ _____		%
-----------------	----------	--	---

Total Expenses	\$ _____		
-----------------------	----------	--	--

Profit	\$ _____		
---------------	----------	--	--

Personal Financial Statement

 12890 Lebanon Road
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www.suretygroup.com
info@suretygroup.com

Name: _____

Home Address: _____

Business Name: _____

Home Phone: _____

Business Phone: _____

ASSETS	Omit Cents	LIABILITIES	Omit Cents
Cash on hand & in banks		Accounts Payable	
Savings Accounts		Notes Payable to Banks and Others <i>(Describe in Section 2)</i>	
IRA or Other Retirement Account		Installment Account (Auto)	
Accounts & Notes Receivable		Monthly Payments (Auto)	
Life Insurance-Cash Surrender Value Only <i>(Complete Section 8)</i>		Installment Account (Other)	
Stocks and Bonds <i>(Describe in Section 3)</i>		Monthly Payments (Other)	
Real Estate <i>(Describe in Section 4)</i>		Loan on Life Insurance	
Automobile-Present Value		Mortgages on Real Estate <i>(Describe in Section 4)</i>	
Other Personal Property <i>(Describe in Section 5)</i>		Unpaid Taxes <i>(Describe in Section 6)</i>	
Other Assets <i>(Describe in Section 5)</i>		Other Liabilities <i>(Describe in Section 7)</i>	
		Total Liabilities	
		Net Worth	
Total		Total	

SECTION 1

Source of Income	Contingent Liabilities
Salary	As Endorser or Co-Maker
Net Investment Income	Legal Claims & Judgments
Real Estate Income	Provision for Federal Income Tax
Other Income (Describe Below)	Other Special Debt
Description of Other Income in Section 1	
Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.	

SECTION 2

Notes Payable to Banks and Others (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)					
Name/Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

SECTION 3

Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

SECTION 4

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

SECTION 5

Other Personal Property and Other Assets

(Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency.)

SECTION 6

Unpaid Taxes

(Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

SECTION 7

Other Liabilities

(Describe in detail.)

SECTION 8

Life Insurance Held

(Give face value amount and cash surrender value of policies, name of insurance company and beneficiaries.)

I authorize The Surety Group, Inc. to make inquiries as necessary to verify the accuracy of the statements made to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining a surety bond. I understand FALSE statements may result in forfeiture of benefits and possible prosecution.

Signature: _____ Date: _____

Signature: _____ Date: _____



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Reference Letter

Contractor Name: _____

Address: _____

Phone: _____

Fax: _____

E-Mail: _____

Contact Name: _____

To Whom it May Concern:

The above listed applicant has applied to us for a surety bond and has listed your name as a reference. Please provide us the benefit of your experience by completing the following letter of reference regarding previous work the contractor has performed. Please be assured that your comments will be held in confidence.

Upon completion of the form, please return to The Surety Group Agency, LLC via mail, fax or e-mail (info@suretygroup.com). Should you have any questions or concerns, please do not hesitate to contact our agency. Thank you for your assistance in this matter.

Largest Project Completed (Dollar Amount): _____

Project Title: _____

Type of Work: _____

Location: _____

Project Start Date: _____

Completion Date: _____

Quality of Workmanship: _____

Cooperation: _____

Was project completed on time? Yes No

Would you work with this firm again? Yes No

Any problems? Yes No

Additional Comments: _____

Obligee Name: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

Contact Name: _____

Date: _____



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Supplier Reference Letter

Contractor Name: _____

Address: _____

Phone: _____

Fax: _____

E-Mail: _____

Contact Name: _____

To Whom it May Concern:

The above listed applicant has applied to us for a surety bond and has listed your name as a reference. We would appreciate your replies to the questions asked, assuring you that such information will be considered strictly confidential and you will not in any way be held responsible.

Upon completion of the form, please return to The Surety Group Agency, LLC via mail, fax or e-mail (info@suretygroup.com). Should you have any questions or concerns, please do not hesitate to contact our agency. Thank you for your assistance in this matter.

How long have you done business with the applicant? _____

What is the largest credit extended? _____

What is the present outstanding balance? _____

Are there any past due amounts? _____

Does the applicant have an open line of credit with you? Yes No

Is the credit line secured? Yes No

How does the applicant pay? _____

Have you ever limited the applicant's purchases? Yes No

If yes, please explain: _____

Do you know of any claims or suits now pending against the applicant? Yes No

If yes, please explain: _____

Comments: _____

Supplier Name: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

Contact Name: _____

Date: _____

Directions for Completing a Work on Hand

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A work on hand is simply a chart outlining all projects currently in progress. Your work on hand will be used in evaluating your bonding capacity and all bond requests. As such, it is important that we have an accurate description of all projects on hand. As a general rule, we require an updated work on hand quarterly.

1. Write your company name and the date at the top of the chart where indicated.
2. In the left hand column, provide us with a brief description of the project: Project Name & Obligee.
3. In the next two columns, provide the start date and anticipated completion date. Please do not include any projects that are complete.
4. Please indicate whether the project was bonded or not by checking the appropriate box.
5. In the column labeled “**CONTRACT PRICE**,” enter the amount of the contract. This total should also include any change orders to the project. Please list only projects of \$50,000 or more.
6. In the column labeled “**CONTRACTOR’S COST**,” enter the amount it will cost you to complete the project (contract amount – profit).
7. In the column labeled “**TOTAL BILLED TO DATE**,” enter the total amount you have billed to date.
8. In the column labeled “**TOTAL COST TO DATE**,” enter the total amount it has cost you to do the project to date. This should not include any profit.
9. In the column labeled “**TOTAL REVISED COST TO COMPLETE**,” enter the total amount it will cost you to complete the project. Generally you can use the following equation to reach the total:

$$\text{CONTRACTORS COST} - \text{TOTAL COST TO DATE} = \text{TOTAL REVISED COST TO COMPLETE}$$
10. After you have completed entering all projects, total each column and record it in the bottom “**TOTALS**” fields.
11. In the bottom left section, record all totals:
 - a. **Total Uncompleted Work**—This amount can be figured by adding all amounts listed in the “**TOTAL REVISED COST TO COMPLETE**” column.
 - b. **Total Uncompleted Work By Sub Contractors**—Please enter the amount of your uncompleted work that will be done by subcontractors.
 - c. **Bonded & UnBonded**—These amounts can be figured by adding the “**TOTAL REVISED COST TO COMPLETE**” fields for the bonded projects and then the unbonded projects.
12. After all totals have been entered, review and sign in the bottom right section.



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 Mt. Juliet, TN 37122
 844-432-6637
 404-351-3237 (F)
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info@suretygroup.com

Schedule of Uncompleted Work

Please list all work (bonded & unbonded) over \$50,000.

Contractor: _____ Date: _____

Project Title & Obligee Name	Start Date	Completion Date	Bonded	Unbonded	Contract Price (Including Approved Change Orders)	Contractor's Cost (Including Cost of Approved Change Orders)	Total Billed To Date	Total Cost To Date	Total Revised Estimated Cost to Complete
			<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>					
Totals									

Total Uncompleted Work: _____

Total Uncompleted Work by Subcontractors: _____

Total Bonded Work: _____

Total Unbonded Work: _____

Signature: _____

Title: _____

Comments: _____

Directions for Completing a Work on Hand

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A work on hand is simply a chart outlining all projects currently in progress. Your work on hand will be used in evaluating your bonding capacity and all bond requests. As such, it is important that we have an accurate description of all projects on hand. As a general rule, we require an updated work on hand quarterly.

1. Write your company name and the date at the top of the chart where indicated.
2. In the left hand column, provide us with a brief description of the project: Project Name & Obligee.
3. In the next two columns, provide the start date and anticipated completion date. Please do not include any projects that are complete.
4. Please indicate whether the project was bonded or not by checking the appropriate box.
5. In the column labeled "**CONTRACT PRICE**," enter the amount of the contract. This total should also include any change orders to the project. Please list only projects of \$50,000 or more.
6. In the column labeled "**CONTRACTOR'S COST**," enter the amount it will cost you to complete the project (contract amount – profit).
7. In the column labeled "**TOTAL BILLED TO DATE**," enter the total amount you have billed to date.
8. In the column labeled "**TOTAL COST TO DATE**," enter the total amount it has cost you to do the project to date. This should not include any profit.
9. In the column labeled "**TOTAL REVISED COST TO COMPLETE**," enter the total amount it will cost you to complete the project. Generally you can use the following equation to reach the total:

$$\text{CONTRACTORS COST} - \text{TOTAL COST TO DATE} = \text{TOTAL REVISED COST TO COMPLETE}$$
10. After you have completed entering all projects, total each column and record it in the bottom "**TOTALS**" fields.
11. In the bottom left section, record all totals:
 - a. **Total Uncompleted Work**—This amount can be figured by adding all amounts listed in the "TOTAL REVISED COST TO COMPLETE" column.
 - b. **Total Uncompleted Work By Sub Contractors**—Please enter the amount of your uncompleted work that will be done by subcontractors.
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12. After all totals have been entered, review and sign in the bottom right section.