

BOND NO.	
PREMIUM S	

				
Name of Surety				
Mailing Address				
Name of Principal Mailing Address	(Customer)			
Service Address				
Southwest Gas Cor	poration			
Mailing Address				
KNOW ALL MEN	BY THESE PRESENT	ΓS: , a		corporation
	(Name of Surety)	,-	(State of Corporate Domicile)	
Held and firmly bou	sites in the State of and unto Southwest Gas Country for the payment A	Corporation ("Sout Dollars (\$	thwest"), a California corporatio), lawf outhwest, the said Principal and	as Surety, is n, in the sum of ul money in the said Surety bind
themselves, their he these presents.	eirs and executors, admir	nistrators, success	ors and assigns, jointly and sev	erally, firmly by
WHEREAS, said Prand is posting this said agreement:	incipal has entered into a bond in lieu of a require	agreement with the ed cash deposit gu	e said Southwest for the purcha paranteeing payment of just bills	se of gas service, s incurred under
to be paid all bills, which such gas serv no obligation to ma	statements or charges for	or gas service supported or contractor, but otherwise	such that if the said Principal soliced or to be supplied at any and teed for by said Principal, then see Surety shall have the obligation of gas service;	id all premises at Surety shall have
			Il pay or cause to be paid to S Southwest, all correct statemen	
upon Southwest specification (60) days after Surety's registry received tunder Southworemises, whichever to Bond. Also, it will	ecifying the effective da r the date borne by Suret reipt that Southwest can levest's applicable rules or r date shall last occur, an Principal to and including	nte of said cancel ty's registry receip lawfully discontinu in file with the re- nd the obligation of ing such date of cancel Surety to advise	bond by written notice served by lation, which no event shall be bit, or (b) the earliest date after the gas service to Principal for fargulatory commission having just the Surety shall extend to parancellation, up to the full amounts outhwest, via certified mail, we	e earlier than (a) he date borne by tilure to establish trisdiction in the yment for all gas int of this Surety
Bond, Surety agree pursuant to judgeme (b) a reasonable atto	s to pay to Southwest, int or settlement, (a) an a princy's fee (irrespective	in addition to an mount equal to So of whether an act	attorneys to enforce any provisi y monies to which Southwest uthwest's cost of suit (if an action ion shall be filed), and (c) inter- upon Surety for payment to the	may be entitled on shall be filed), est at the highest
Principal is hereto signature and seal o attested by its duly	HEREOF, the signature of affixed, and the confithe said Surety is here authorized Attorney-in-fa	rporate name, eto affixed and act, as required		
This Day of				
Signatura of Sum	of to			
	ty cipal			
-	tipui <u> </u>			

INTEGRITY SURETY BOND APPLICATION

			AGENCY CONTACT			
AGENCY PHONE:	AGENCY F	FAX:	E-MAIL:			
AGENCY ADDRESS:						
CURRENT OR EXPIRING QUOTE WE ARE	LOOVING TO PEAT?	,	(City)	(State)	(Zip)	
		-				
NAME OF PREVIOUS SURETY COMPANY	WRITING THE BONL)?				
SECTION I: BOND APPLIED FOR: TYPE OF BOND:		EFF.DATE:	EXP.DA	ΓE:		
TYPE OF COMPANY CORP LLC	DBA PARTNER					
OBLIGEE:						
OBLIGEE ADDRESS: (Street)		(City)	(State)		(7in)	
SECTION II: GENERAL INFORMATION		,	(State)		(Zip)	
APPLICANT'S NAME:		SPOUSE NAME				
SS#:SPO	USE SS#	HOI	ME PHONE:			
RESIDENTIAL ADDRESS:(Street)		(City)	(8: 1.)		(3:)	
BUSINESS NAME:		(City)	(State)		(Zip)	
BUSINESS PHONE:	BUSINESS FAX:		Client E-mail			
BUSINESS ADDRESS: (Street)		(City)	(State)		(Zip)	
DATE BUSINESS BEGAN UNDER CURRENT	NAME:		BUSINESS TAX ID:			
HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE?		O YOU HAVE ANY LIE GAINST YOU?	NS, CLAIMS, OR JUDG	EMENTS	YES NO	
HAS APPLICANT EVER FAILED IN BUSINES	SS? YES 🗌 NO 🗍 H	IAS APPLICANT EVER	FILED BANKRUPTCY?	,	YES NO	
					,	
IF YES TO ANY. I	PLEASE EXPLAIN ON A	A SEPERATE SHEET C				
·		A SEPERATE SHEET C				
SECTION III: ADDITIONAL OWNERS / PART	NERS	A SEPERATE SHEET O				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#:SPOI	NERS	SPOUSE NAME	OF PAPER:			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME	OF PAPER:		(Zip)	
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM	NERS	SPOUSE NAME HO!	ME PHONE: (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS	NERS USE SS# MENT OF ASSETS & I	SPOUSE NAME HON (City) LIABILITIES AS OF LIABILITIES	ME PHONE: (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK	NERS USE SS# MENT OF ASSETS & I	SPOUSE NAME HO! (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T	ME PHONE: (State) O BANKS	\$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND	NERS USE SS# MENT OF ASSETS & I	City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T	ME PHONE: (State) GO BANKS O OTHERS	\$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS	NERS USE SS# MENT OF ASSETS & I \$ \$ \$	CCity) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB	ME PHONE: (State) O BANKS O OTHERS	\$ \$ \$		
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Completion of this form constitutes permission to obtain consumer information which will be used to determine bonding eligibility This information will be held in the strictest confidence no premium financing will be accepted as premium is earned in full.

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