



STATE OF \_\_\_\_\_ BOND # \_\_\_\_\_

COUNTY OF \_\_\_\_\_

KNOW ALL MEN BY THE PRESENTS, THAT WE \_\_\_\_\_

OF \_\_\_\_\_, County of \_\_\_\_\_

State of \_\_\_\_\_ AS PRINCIPAL, (hereinafter called "Principal") and \_\_\_\_\_ as Surety

(hereinafter called "Surety"), are held and firmly bound unto the KISSIMMEE UTILITY AUTHORITY, Kissimmee, Florida, in the sum of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_), for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents; and

WHEREAS, the Principal has entered into an Electric, and/or Water Service Contract, which also covers all other charges that Kissimmee Utility Authority is authorized to collect, on the \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_, which Kissimmee Utility Authority, P.O. Box 422148, Kissimmee, Florida 34742-2148, providing for the payment due KISSIMMEE UTILITY AUTHORITY, Kissimmee, Florida, from the Principal for electric and/or water service and all other charges it is authorized to collect.

NOW, THEREFORE, in consideration of the premises, if the above named Principal shall promptly pay to KISSIMMEE UTILITY AUTHORITY, Kissimmee, Florida, all bills for electricity and/or water, and or sanitation charges, sewer charges and taxes, if any, on any of these services, or for any appliances used in connection with same, or for any material of any kind purchased from or services rendered by said Utility, together with all penalties and interest thereon, and shall pay all costs of collection of such charges and of performance of such contract, including a reasonable attorney's fee if placed in the hands of an attorney in case of default thereunder, and shall generally faithfully comply with the provisions of said contract, then this obligation shall be null and void; otherwise to remain in full force and effect.

THIS BOND IS ISSUED AND EXECUTED SUBJECT TO THE FOLLOWING CONDITIONS:

- 1. That the term of this bond shall be indefinite.
2. That the surety bond company reserves the right to cancel this bond by giving sixty (60) days notice to the said

\_\_\_\_\_ and KISSIMMEE UTILITY AUTHORITY, P.O. Box 422148, Kissimmee, Florida 34742-2148, and upon receipt of such cancellation notice, the Surety is discharged and relieved of any liability thereafter accruing hereunder, it being understood and agreed, however, that the said Principal and the said Surety will be liable for any loss accruing up to the effective date of said cancellation, including costs of collection of any amounts due under said contract and of enforcement of performance thereof, as herein described, in no event, however, in excess of the penalty of this Bond.

SIGNED, SEALED AND DATED this the \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Attest for Principal \_\_\_\_\_

Principal \_\_\_\_\_

Attest for Surety \_\_\_\_\_

By \_\_\_\_\_

Florida Agent Countersign \_\_\_\_\_

Surety \_\_\_\_\_

Address, City, State \_\_\_\_\_

Surety Address \_\_\_\_\_

Florida Agent License Number \_\_\_\_\_

Surety Telephone & FAX Numbers \_\_\_\_\_

Telephone & FAX Numbers \_\_\_\_\_

By: Attorney-in-Fact \_\_\_\_\_

# INTEGRITY SURETY BOND APPLICATION

AGENCY NAME: \_\_\_\_\_ AGENCY CONTACT \_\_\_\_\_  
 AGENCY PHONE: \_\_\_\_\_ AGENCY FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 AGENCY ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT?** \_\_\_\_\_

**NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND?** \_\_\_\_\_

**SECTION I: BOND APPLIED FOR:**

TYPE OF BOND: \_\_\_\_\_ EFF.DATE: \_\_\_\_\_ EXP.DATE: \_\_\_\_\_  
 TYPE OF COMPANY CORP  LLC  DBA  PARTNERSHIP  AMOUNT: \_\_\_\_\_  
 OBLIGEE: \_\_\_\_\_

OBLIGEE ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**SECTION II: GENERAL INFORMATION**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

BUSINESS NAME: \_\_\_\_\_

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? YES  NO  DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS AGAINST YOU? YES  NO

HAS APPLICANT EVER FAILED IN BUSINESS? YES  NO  HAS APPLICANT EVER FILED BANKRUPTCY? YES  NO

**IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:**

**SECTION III: ADDITIONAL OWNERS / PARTNERS**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**STATEMENT OF ASSETS & LIABILITIES AS OF \_\_\_\_\_**

ASSETS		LIABILITIES	
CASH IN BANK	\$	NOTES PAYABLE TO BANKS	\$
CASH ON HAND	\$	NOTES PAYABLE TO OTHERS	\$
STOCKS & BONDS	\$	ACCOUNTS PAYABLE	\$
ACCOUNTS RECEIVABLE	\$	FEDERAL & STATE INCOME TAX DUE	\$
NOTES RECEIVABLE	\$	ALL OTHER TAXES	\$
INVENTORY	\$	ACCRUALS, PAYROLLS, ETC.	\$
CASH VALUE OF LIFE INSURANCE	\$	DUE ON EQUIPMENT	\$
EQUIPMENT	\$	DUE ON REAL ESTATE	\$
REAL ESTATE	\$	OTHER LIABILITIES	\$
OTHER ASSETS	\$	CAPITAL STOCK (IF A CORPORATION)	\$
		SURPLUS & UNDIVIDED PROFITS	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>NAME OF OWNERS</b>		<b>NAME &amp; TITLE OF OFFICERS</b>	<b>PERCENTAGE OF OWNERSHIP</b>

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.

**Integrity Bonds Inc**

**Toll Free: (866) 420-2613**

**Local (480) 626-8916**

**E-Mail [info@integritybonds.com](mailto:info@integritybonds.com)**

**Fax: (602) 674-8235**