

**CONTRACTOR'S BOND  
City of Jackson**

Telephone No. \_\_\_\_\_  
City No. \_\_\_\_\_

\$5,000.00

Bond. No. \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS:

That we, \_\_\_\_\_  
Principal, whose home office or place of residence is \_\_\_\_\_  
in the State of \_\_\_\_\_, and \_\_\_\_\_  
a Surety Company domiciled at \_\_\_\_\_, in the State of \_\_\_\_\_  
but authorized to do business in the State of Mississippi, under the laws thereof, as Surety, are held and  
firmly bound unto the City of Jackson, Mississippi, a municipal corporation, in the penal sum of Five  
Thousand Dollars (\$5,000.00), lawful money of the United States of America, to be paid to it, for which  
payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally, by  
these presents.

The conditions of this bond are such, that whereas the said \_\_\_\_\_  
\_\_\_\_\_, Principal, has been granted a permit or license by the said City of Jackson to  
operate therein as a \_\_\_\_\_ general contractor (or plumbing contractor, gas fitting contractor,  
electrical contractor, air conditioning contractor, or house moving contractor),  
under the rules, regulations and ordinances adopted by the Council of said City and in force and effect and  
under the applicable laws of the State of Mississippi, and will hereafter, from time to time, apply for and be  
granted permits to do particular work and operations thereunder.

Now therefore, if the above bound principal shall faithfully perform all work under the said license and  
do and perform all work in connection with the erection, construction or maintenance required under each  
and every permit granted under the said license, and make all installations (or house moving, as the case  
may be) required under any permit granted therefor strictly in accordance with the terms thereof, and with  
the rules and regulations and ordinances of the City of Jackson and the laws of the State of Mississippi, and  
shall further pay to the City of Jackson the sum of One Hundred Dollars (\$100.00) as liquidated damages for  
each and every violation of any of the provisions of said permit and the rules and regulations and ordinances  
of the City of Jackson and of the laws of the State of Mississippi in the erection, construction, maintenance,  
or installation of any work (or in the moving of any house, as the case may be) required under any permit  
issued to said principal under said license and, in addition thereto, shall indemnify and save harmless the  
City of Jackson, its officers and agents from any and all claims, damages, suits, actions or causes of action  
arising from or growing out of any act done in violation of the said permit and the rules, regulations,  
ordinances and laws, then this obligation shall be null and void; otherwise to remain in full force and effect.

It is agreed and understood, however, that the said contractor shall be given five (5) days' notice of any  
violation for which the liquidated damages above provided for should be paid, within which five (5) days the  
said contractor would have opportunity to make the necessary correction, and upon his failure so to do  
demand will be made for payment of the liquidated damages hereinabove provided for

It is further provided that this bond may be cancelled by the surety upon written notice of cancellation  
delivered to the Director of the Building Department, provided, however, that such cancellation shall not  
affect any liability which has theretofore become fixed, and shall not affect permits theretofore granted, the  
work under which has not been completed.

WITNESS the signatures of the said principal and the surety on this the \_\_\_\_\_ day of  
\_\_\_\_\_ 19 \_\_\_\_\_

COUNTERSIGNED: \_\_\_\_\_ (SEAL)  
Resident Mississippi Agent

By: \_\_\_\_\_  
(Official Title)

(SEAL)

\_\_\_\_\_  
(Surety)

APPROVED: \_\_\_\_\_  
Director, Building Department  
City of Jackson, Mississippi

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**

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