123 Tice Blvd Ste. 250 ~ Woodcliff Lake, NJ 07677 | (201) 573-8788 | Email: Contractsurety@colonialsurety.com | Fax (866) 449-8004

HOMETOWN CONTRACTOR BOND PROGRAM

The information requested in this questionnaire is required for us to consider your company for bonding. Please answer all questions completely so that we can properly evaluate and understand your business and avoid delays in processing your application due to missing information.

Once you have completed and signed the application, please return it to contractsurety@colonialsurety.com

COMPANY AND OWNER INFORMATION

NAME OF COMPANY:_____
COMPANY ADDRESS:_____
BUSINESS PHONE:_____ FAX#:_____
E-MAIL ADDRESS:_____ Business EIN#_____
Please Check One: □ Corporation □ Partnership □ Proprietorship □ LLC SIC Code:_____
What is the date the company was established?_____Date Incorporated?_____

OWNERSHIP INFORMATION: (Please give full names with middle initial of you and your spouse)

Legal Full Name of Owner(s)	S.S.#	Home Address Street, City, State, Zip	% of Ownership	S __ M__ W__ D__ Legally Separated____ Legal Full Name of Spouse

If this Company is a Corporation, please list the Officers:

President_____ Secretary_____

Vice President_____ Treasurer_____

RELEASE

This release must be signed on behalf of your company owner. It will be sent to any person or company who requests verification of your consent for us to receive credit or reference information.

The undersigned hereby grants permission for any individual, company or organization to release credit consistent with the Fair Credit Reporting Act and/or reference information to Colonial Surety Company for their consideration of this Company and/or its owners for bonding.

_____ _____

Company Consent Date Owner/President Consent Date

BOND INFORMATION

OPERATIONS INFORMATION

1. What is the name of you current bonding company? (The insurance company that issues the bond)_____
2. What is the name of the insurance agency that provides your business insurance?_____
3. What is the name of the bond agent that provides your bonds, if different than above?_____
4. What was the largest contract that you completed in the last 2 years $_____
5. What kind of work do you do _____
6. What is the territory of your operations _____
7. Who does the estimating for your company _____

Underwriting Parameters

- Minimum personal credit score of 700 for all Principals (owners)
- Contract must be located within 50 miles of the contractors' home base
- Contract performed must be self-performed
- Contract work must be within the contractor's specialty

SUPPLEMENTAL INFORMATION

Please attach an explanation for any **Yes** answers:

1. Are there any judgments, suits, claims, tax liens, or other liens against this company, or any prior owned company(s), or any owner or spouse?.....□ No □ Yes
2. Is the company or any owner or spouse acting as surety or indemnitor for anyone?.....□ No □ Yes
3. Has the company or any owner or spouse ever failed in business or compromised with any creditor?.....□ No □ Yes
4. Has the company, or any prior owned company(s), or any owner or spouse ever defaulted on a contract?.....□ No □Yes
5. Has any owner or spouse ever filed for personal or business bankruptcy?.....□ No □ Yes
6. Has any surety ever paid a claim on any bond for this company, or any prior owned company(s) or for any owner or spouse? .....□ No □ Yes,

   If so, please explain

   _____
7. Has the surety ever incurred any expenses as a result of a bond claim for this company, or any prior owned company(s) or for any owner or spouse?.....□ No □ Yes

   If yes, did you reimburse the Surety?..... .....□ No □ Yes
8. Are any of the company assets or any owner's or spouse's assets pledged as security for any purpose?..... □ No □ Yes, if yes please explain_____
9. Are there any subsidiary and/or affiliate companies…….....□ No □ Yes

   If yes, please list _____

The following statement must be signed on behalf of your company and by each owner.

The information contained in this statement is provided for the purpose of obtaining, or maintaining surety credit with you on behalf of the undersigned, or persons, firms or corporations on whose behalf the undersigned may either severally or jointly with others, execute a guarantee in your favor. Each undersigned understands that Colonial Surety Company is relying on the information provided herein (including the designation made as to ownership of all assets) in deciding to grant or continue surety credit. EACH UNDERSIGNED REPRESENTS AND WARRANTS THAT THE INFORMATION PROVIDED IS TRUE AND COMPLETE AND THAT YOU MAY CONSIDER THIS STATEMENT AS CONTINUING TO BE TRUE AND CORRECT UNTIL A WRITTEN NOTICE OF A CHANGE IS GIVEN TO COLONIAL SURETY COMPANY at 123 Tice Blvd, Woodcliff Lake, NJ 07677 201-573-8788 BY THE UNDERSIGNED. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer questions about your surety credit experience with me/us.

A SURETY BOND IS NOT INSURANCE

ALL INDEMNITORS UNDER THE BOND WILL SEVERALLY AND JOINTLY BE LIABLE FOR PAYMENT TO THE SURETY OF ANY DEFAULTS AND EXPENSES INCURRED BY THE SURETY AS A RESULT OF ANY CLAIM INCURRED UNDER THE SURETY BOND.

Company Consent	Date	Owner/President Consent	Date
Owner/President Consent	Date	Owner/President Consent	Date

Colonial Surety Company

(201) 573-8788 or (800) 221-3662 Fax (201) 573-1062
E-Mail: info@colonialsurety.com

PERSONAL FINANCIAL INFORMATION

Company Name:_____

Applicant's Name _____ **Date of Birth** _____ **Social Security #** _____

Spouse's Name _____ **Date of Birth** _____ **Social Security #** _____

Residence Address _____ **Telephone No.** _____

Statement of Financial Condition as of _____

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash in Banks (Sched. 1)		Notes Payable to Banks – Unsecured	
Cash in Money Market Funds		Notes Payable to Banks – Secured	
Other Receivables		Note Payable to Others	
Marketable Securities & Mutual Funds (Sched. 2)		Due to Brokers – Margin Accounts	
		Bills and Charge Card Payable	
Cash Surrender Value of Life Insurance		Contractual Tax Shelter Investments Due	
Retirement Accounts (IRA, Keogh, 401-K)		Income Taxes Payable	
Non-Marketable Securities		Other Taxes Payable	
Primary Residence (Sched. 3)		Loans Against Life Insurance	
Other Wholly Owned Real Estate (Sched. 3)		Mortgage Balances Owed (Primary Residence)	
Limited Partnership Investments (Cost)		Other Wholly Owned Real Estate	
Autos and Personal Property		Partially Owned Real Estate	
Other Assets (List)		Other Liabilities (List)	
TOTAL ASSETS		TOTAL LIABILITIES	
		NET WORTH	
TOTAL		TOTAL	

Schedule 1 Cash in Banks

Name of Bank	Address	Type of Account	Account Number	Balance

Schedule 2 Marketable Securities and Mutual Funds

Number of Shares or Face Value (Bonds)	Description	In Name Of	Are These Pledged?	Market Value

Schedule 3 Primary Residence and Real Estate Owned

Address and Type of Property	Title in Name of	% of Ownership	Monthly Rental Income	Cost/ Year Acquired	PresentMarket Value	Unpaid Mortgage Balance	To Whom Mortgage Payable	Monthly Mortgage Payment
			$					Payment $____
			Year					per month
			$					Payment $____
			Year					per month

This applicant warrants and certifies that the above information is true and acknowledges that Colonial Surety Company is relying on this information as a basis for extending surety credit:

Applicant's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Colonial Surety Company

123 Tice Blvd Ste 250, Woodcliff Lake, NJ 07677
(800) 221-3662 Fax (866) 449-8004
bonddept@colonialsurety.com

Hometown Bid Bond Request Form

All questions and upload must be completed to be processed

Contractor's Company Name: _____

Contractor's Address _____
Street City State Zip Code

Name of Obligee:_____
(Entity you're doing work for)

Address of Obligee:_____
City:_____ State:_____ Zip: _____
Obligee Phone Number: _____ Contract Person:_____

Bid Date:_____ Time of Bid:_____am/pm
Estimated Contract Price $_____
% required for the bid bond_____ or Flat Amount_____

Project Name:_____
Complete Description of Work:_____
_____
_____
Location of the job:_____

Estimated Contract Price $_____
% required for bid bond:_____
Amount of requested bid bond $_____
Liquidated Damages _____
Payment Terms $_____
% of Work Subbed Out _____
Consent of Surety Required _____
(if yes, please upload the requirements)

JOB COST BREAKDOWN
% Profit_____
% Materials_____
% Labor_____
% Subcontractors_____
% Overhead_____
Maintenance Period_____

Method of Delivery: USPS_____ UPS_____ Fed Express_____
Account#_____ or $30.00 Fee for Overnight Delivery

Note: Special bond Forms (if required) and Bid Specifications must be included with this form.
Please fax (866) 449-8004 or email: bonddept@colonialsurety.com

Colonial Surety Company

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(800) 221-3662 Fax (866) 449-8004
bonddept@colonialsurety.com

Hometown Performance Bond Request Form

All questions and uploads must be completed to be processed

Contractor's Company Name: _____

Contractor's Address _____
Street City State Zip Code

Name of Obligee:_____
(Entity you're doing work for)

Address of Obligee:_____
City:_____ State:_____ Zip: _____
Obligee Phone Number: _____ Contract Person:_____

Project Name:_____
Complete Description of Work:_____
_____
_____
Location of the job:_____
Please submit a copy of the Contract.

Contract Number (if applicable) _____
Contract Date _____
Amount of Contract $ _____
Bond Amount $ _____
Estimate Date of Completion _____
Liquidated Damages_____
Payment Terms_____

JOB COST BREAKDOWN
% Profit_____
% Materials_____
% Labor_____
% Subcontractors_____
% Overhead_____

Will a Maintenance bond be required? □ YES □ No If yes, at the □ end of project or □ upfront
% of Maintenance Bond _____ Required Years_____

Please provide Engineers Estimate, 2nd and 3rd low bidders:

Engineers Est $_____
2nd Bidder Name _____ Dollar Amt $_____
3rd Bidder Name _____ Dollar Amt $_____

Method of Delivery: USPS_____ UPS_____ Fed Express_____
Account#_____ or $30.00 Fee for Overnight Delivery

Method of payment: Paper Check □ E-Check □ Credit Card □
(If payment is made by paper check or E-Check the bond will be issued after the transaction clears)

Will you have Suppliers for this project □ Yes □ No

Will you have Subcontractors on this project □ Yes □ No

Will you have Union Workers on this project □ Yes □ No
If yes please provide a list, see the supplier/subcontractors and union form

Note: Special bond Forms (if required) and Contract must be included with this form. Please fax (866) 449-8004 or email: bonddept@colonialsurety.com

COLONIAL SURETY COMPANY

Contract Bond - List of Suppliers, Subcontractors & Union

Principal: _____

Obligee: _____

Project: _____

Type	Supplier / Subcontractor Name	Contract Amount	Address	Contact Name	Telephone

Are you using union labor on this contract? ☐ Yes ☐ No

If yes, provide the following information:

Union Name	Address	Contact	Telephone

Please be sure to give complete addresses and phone numbers. Thank you.