

SureTec Insurance Company

Agency			
Agency Address			
Agency Phone	Agency Fax	Agency Email	
Agency recommendation			

Lost Instrument Bond Application

Bond Amount Requested \$		Date of Instr	ument	Date Last Seen		
Who is requiring the Bond (Obligee)						
Obligee's Address			City	State	Zip	
Does Obligee require their own bond form?	If yes, please attach a copy if possible					
Serial Number and Description of the Instrument (or attach copy of any correspondence)						
Details of how it was lost						
Owner/Applicant Name (as it is to appear on the bond)						
Address			City	State	Zip	
SS# or Tax ID#		Phone		Fax		
				-		
Is the instrument payable to applicant only?		No	Has notice of	of loss been given?	∐Yes ∐No	
Is the instrument endorsed or pledged?	Yes 🗌	No	Has paymer	nt been stopped?	Yes No	
Are you the absolute owner of the instrument?	∏Yes ∏	No				

If bond amount is greater than \$2,500, please complete the financial information below. You may attach a separate sheet.

Assets	Liabilities	
Cash on hand and in banks	Accounts payable	
Savings Accounts	Notes Payable to banks	
IRA or retirement accounts	Notes Payable to others (describe)	
Accounts & Notes Receivable	Installment Accounts (describe)	
Life insurance (cash surrender value only)	Loan on Life Insurance	
Stocks & Bonds	Unpaid taxes	
Real Estate(homestead)	Mortgage on Homestead	
Real Estate (investments)	Mortgage on real estate investments	
Autos	Other Liabilities (describe)	
Other personal property	Total Liabilities	
Other Assets (describe)	Net Worth (Assets less liabilities)	
Total Assets	Total Net Worth and Liabilities	

Indemnification Agreement – Read Carefully and Sign

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned individually hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

1. That the provided information is true and correct.

2. To reimburse SureTec Insurance Company ("Surety") upon demand for all payments made for and to indemnify Surety from: a) all loss, contingent loss, liability and contingent liability, claim, expense, including attorneys' fees and claims adjusting fees, for which Surety shall pay, become liable or shall become contingently liable by reason of such suretyship, whether or not Surety shall have paid same at the time of demand; and b) to pay Surety an advance premium for the first year or a fractional part thereof that is fully earned and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee. c) Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned.

3. Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Houston, Harris County, Texas and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Harris County, Texas. A facsimile of this Agreement shall be considered an original and shall be admissible in a court of law as such.

4. Surety is authorized to investigate, at any time, the undersigned's credit, employment history, and department of motor vehicle records. Privacy Notice: All nonpublic personal information gathered pursuant to the application shall not be disclosed except as permitted by law.

5. Surety, at its sole discretion and without notice to the undersigned is authorized, but not required, to make or consent to changes in the bond or to issue substitute bonds or renewals thereof and this indemnification shall apply to such change, substitute or renewal bond.

6. Regardless of the date of signature, this indemnity is effective as of the date of execution of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).

Important Signature Instructions

- If sole owner, applicant must sign as duly authorized representative. Spouse must sign as additional indemnitor below.
- If a general partnership, an authorized partner must sign as duly authorized representative. All authorized partners and spouses must sign as additional indemnitor below.
- If a corporation the president must sign as the authorized representative. All stockholders of 10% or more and spouses must sign as additional indemnitor below.

Signed and dated this	day of	, 20		
(Print Name)		X	((Title)
)		(The)
Print Company Name			(Principal's authorized representative)	(Title)
		Addition	al Indemnitors	
Witness:		>	((Print Name)
Witness:		>	<	
			(Signature)	(Print Name)

To reach the SureTec branch closest to you, Call 800-787-3896