



ADMINISTRATIVE OFFICE: 50 CHESTNUT RIDGE ROAD, MONTVALE, NJ 07645 1-800-221-3662 FAX: 201-573-1062
 E-Mail: info@colonialsurety.com

CONTRACTOR'S INFORMATION FORM

The information requested in this questionnaire is required for us to consider your company for bonding. Please be as thorough as possible when you answer the questions. We request that you answer all of the questions so that we will properly understand your business and that we will not have to delay your application waiting for complete information. When you have completed and signed the form, return it with the following:

- The two most recent year-end financial statements for the company and most current interim statement, if available. The most recent year-end statement must be audited or reviewed.
- Current personal financial statements for each owner of the company.
- Bank reference letter on Bank's Letterhead stating number of years the contractor has been banking with this bank, average balance of Deposits, Line of Credit (secured and/or unsecured and current amount outstanding).
- Current Aging Schedule of Accounts Receivable and Accounts Payable (computer print out).
- Current Work on Hand (Form M300-103 or computer print out)

If you have any questions concerning the completion of this application, please call **Colonial Surety Company**. Thank you.

COMPANY AND OWNER INFORMATION

NAME OF COMPANY: _____
 COMPANY ADDRESS (NO PO BOX): _____
 BUSINESS PHONE: (With Area Code) _____ FAX #: _____
 E-MAIL ADDRESS: _____ Web Site: _____
 Please Check One: Corporation Partnership Proprietorship
 What is the date the company was established? _____ Date Incorporated? _____
 Application Date _____ Referral Code: _____

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

Name of Owner(s)	Social Security Number	Home Address with Zip Code	% of Ownership	Spouse's Full Name

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 and by each 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/Spouse Consent Date

 Owner/Spouse Consent Date

 Owner/Spouse Consent Date

BOND INFORMATION

1. What is the largest amount of uncompleted aggregate work-on-hand at any one time? _____ What Year? _____
2. What uncompleted aggregate work-on-hand limit are you applying for? _____
3. What is your largest completed job? \$ _____ What year? _____ Bonded? _____
4. What single bond limit are you applying for? _____
5. What is the name of your current or most recent bonding company? _____
6. What was the year's percentage of bonded work? _____ % \$ _____
7. What is your reason for changing bonding companies? _____

OPERATIONS INFORMATION

1. Name of your insurance agency? _____ Name of your bond agency? _____
2. Describe your operations: _____
3. Territory of Operations: _____
4. Is your company? Union Open Shop If yes, please list Unions Non-Union

Name of Union	Full Address	Phone No.

5. Please list your key company personnel:(Attach resumes)

Individual	Age	Position	Years Experience In This Type of Business	Years With This Company

6. Is there a formal buy sell agreement in effect? No Yes How is it funded? _____

7. Please provide a list of life insurance on owners by amounts, company name and beneficiaries:

Owner	Amount of Insurance	Beneficiary

8. What arrangements have been made to assure contracts are completed in the event the owner(s) are not available?

FINANCIAL INFORMATION

1. Please list all banks and/or financial institutions where you have deposit accounts or loans:

Name of Bank	Mailing Address with Zip Code & Tel. No.	Type Of Account	Account Number	Date Opened
Your Banking Officer:		Title:	Tel.#	
Your Banking Officer:		Title:	Tel.#	

2. Do you have a line of credit? No Yes-In what amount? _____ How much of the line is in use at the present time? _____ Is the line secured? No Yes-By what? _____
 If more than one bank is listed above, **at which bank do you have the line of credit?** _____

REFERENCE INFORMATION

(The references listed below will be verified by Colonial Surety Company. Thank you.)

1. Please list the FIVE largest jobs you have completed in the past three years:

Contract Amount	Year Completed	Kind of Work And Location Of Job	Bonded	Prime	Sub	Must Have Owners or General Contractor's Name, Phone Number
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2. Please list your FIVE largest suppliers from whom you buy most of your materials.

Name of Company	Type Of Supplier	Mailing Address with Zip Code	Must List Contact Names And Phone Numbers

3. Please list Architects and/or Engineers who are familiar with your work:

Name of Company	Type Of Business	Mailing Address with Zip Code	Must List Contact Names And Phone Numbers

SUPPLEMENTAL INFORMATION

1. Are there any judgements, 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 having any controversy(s) concerning payment of labor or materials on any contract?..... No Yes
3. Do you anticipate collection problems with any of your receivables?..... No Yes
4. Has the company or any owner or spouse ever failed in business or compromised with any creditor?..... No Yes
5. Has the company, or any prior owned company(s), of any owner or spouse ever defaulted on a contract?..... No Yes
6. Has any owner, spouse or key employee ever file for personal or business bankruptcy?..... No Yes
7. 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 _____
8. 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
9. Has the company ever been declined by a bonding company? No Yes, if so what company? _____
10. Is the company or any owner or spouse acting as surety or indemnitor for anyone?..... No Yes
11. Are any of the company assets or any owner's or spouse's assets pledged as security for any purpose?..... No Yes
12. Are there any subsidiary and/or affiliate companies?..... No Yes If so, please list them _____

Please attach an explanation for any "Yes" answers:

Comments: _____

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. It is further understood that Colonial must be notified of any change in ownership or a change in marital status of each and every owner. Each undersigned understands that Colonial Surety Company is relying on the information provided herein and in the future, (including the designation made as to ownership of all assets and marital status of each owner) in deciding to grant or continue surety credit. **EACH UNDERSIGNED REPRESENTS AND WARRANTS THAT THE INFORMATION PROVIDED IS TRUE AND COMPLETE 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 50 Chestnut Ridge Road, Montvale, NJ 07645, 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