

Garnishment Bond Application

(In order to process your application quickly please make sure all information is complete and correct.)

In order for us to properly evaluate your request please forward the following information:

- Court Documentation all documentation relating to the case.
- **Corporate Financial Statements** Please provide us with the latest fiscal year end statement. This should consist of, at least, a Balance Sheet & Income Statement (or Profit & Loss).
- **Please note: we may ask for additional information or clarification of certain aspects of this application during the underwriting process.

Business Information

Company Name:										
Mailing Address:										
Type of Business: Indiv	vidual Partnership	Corporation	Other							
Telephone #: Fax #: Email Address:										
Preferred Method of Conta	act: Phone Fax	Email								
Date Business was started:			FEIN #:							
Describe the Nature of you	ır Business:									
Amount of Bond:			Effective Date:							
Has a previous surety writt			If yes, reason for cha	inge:						
Describe nature and reason	n for action:									
How did you hear about us	······································									
Name: % O										
				Years of Experience:						
Name:		% Ow	vned:	Soc. Sec. #:						
Date of Birth:	Spouse:		Years Owned Bus.:	Years of Experience:						
Address:				Home Phone #:						
Does the business or an										
· ·	ng collection items or I	Yes No								
	judgments against the	∐ Yes ∐ No								
• Ever failed in busine	☐ Yes ☐ No									
• Ever been convicted of a crime:										
 Ever had business license or bond suspended, revoked, cancelled, or denied: Are <u>any</u> owners not U.S. citizens? Yes No 										
"Your Leading Bond Team"										

Parties Involved

Plaintiff Name:							
Plaintiff's Address:							
Defendant Name:							
Defendant Address:							
Attorney Firm (Applican	t):						
Attornov's Address							
Contact name:			Title of Contact:				
Phone:		Fax:		Email:			
			anc	ial Information			
					na		
Individual Name		wner with 10% interest or more must complete the following Statement as of (Month/Year)			_		
ilidividdai ivaille				Statement as or (Worthly real	,		
Cash on hand and in banks		\$		Accounts Payable		\$	
Savings Accounts		\$		Notes Payable to Banks and Others		\$	
IRA or Retirement Acct.		\$		Installment Account (Auto)		\$	
Accounts & Notes Receivable		\$		Installment Account (Other		\$	
Life Ins. – Cash Surrender Value Only		\$		Loan on Life Insurance		\$	
Stocks and Bonds		\$		Unpaid Taxes		\$	
Real Estate (complete section below)		\$		Mortgages On Real Estate		\$	
Automobile – Present Value		\$		Other Liabilities		\$	
Other Personal Property	/	\$					
Other Assets		\$					
	Total Assets:	\$		Total Lial	oilities:	\$	
Real Estate Owned	Property A		Prop	erty B	Proper	ty C	
Type of Property							
Address							
Date Purchased							
Original Cost	\$	Ċ		\$ \$		<u> </u>	
Present Market Value	\$		\$		\$		
Mortgage Holder	<u> </u>		7		- T		
Mortgage Balance	\$		\$	\$		\$	
Monthly Payment	\$		\$		\$		
manner of meeting obligation contained in the attachments is to remain in full force until may result in forfeiture of ber	s to verify the accurate true and accurate true and accurate scinded by the analesits and possible 234(1) (b), "Any p	uracy of the statements mad rate as of the stated date(s). pplicant in writing. These sta criminal and/or civil prosecu erson who knowingly and wi	e and to A copy atement ition. ith inter	ng or pertaining to the undersigned's for determine my credit worthiness. I center of this agreement shall be considered to are made for the purpose of obtaining to injure, defraud, or deceive any instructed degree."	rtify the ab the same a ig a bond.	ove and the statements as the original. This authorization I understand FALSE statements	
Signature:	Print			Name:	Date:		
Signature:				Name:	Da	ate:	
		"Your Le	padina	Bond Team"			