AGENT USE ONLY
BOND NUMBER

HCC

HCC Surety Group
601 S. Figueroa Street, Suite 1600, Los Angeles, California 90017

CALIFORNIA CONTRACTOR LICENSE BOND APPLICATION

A	BUSINESS INFORMATION		
BUSINESS/ LICENSE NAME			CONTRACTORS LICENSE NUMBER or APPLICATION FEE NUMBER
IF RME/ RMO, QUALIFYING INDIVIDUALS NAME			
ADDRESS			REQUESTED EFFECTIVE DATE
CITY/ STATE/ ZIP		BUSINESS PHONE	BUSINESS FAX

B	INDEMNITOR INFORMATION		
FIRST NAME/ MIDDLE NAME/ LAST NAME	DRIVER'S LICENSE NUMBER	DATE OF BIRTH	SOCIAL SECURITY NUMBER
HOME ADDRESS			EMAIL ADDRESS
CITY/ STATE/ ZIP		HOME PHONE NUMBER	HOME FAX NUMBER

INDEMNITY AGREEMENT - READ CAREFULLY AND SIGN

IN CONSIDERATION of the execution of such bond, the undersigned individually and if applicable, on behalf of the partnership or corporation, hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

1. To reimburse American Contractors Indemnity Company ("Surety") upon demand for all payments made for and to indemnify Surety from all loss, claim payments, costs and expenses, including attorneys' and construction consultants' fees, which the Surety incurs;
2. To pay Surety an advance premium for the first year or a fractional part thereof and to pay annually thereafter such annual premium for suretyship until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee;
3. 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;
4. The place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California; and
5. Surety is authorized to investigate, at any time, the undersigned's credit, employment history, and department of motor vehicle records.

Regardless of the date of signature, this indemnity is effective as of the date of execution and renewal 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).

Signed, sworn to and dated this _____ day of _____ , _____ .

X _____
(Authorized Representative and Individually)

X _____
(Authorized Representative and Individually)

Agent Name:	_____	Phone:	_____
Address:	_____	Fax:	_____
City,State, Zip	_____	HCCS Prod No.	_____

visit us at www.hccsurety.com for more information