



SURETY SERVICES, LLC

The Bond Guaranty Company

TOLL-FREE (888) 294-6747 | FAX (320) 269-3154
erika@goldleafsurety.com**"SHORT-CUT"**
Bond Application

⇒ For contract bonds of \$400,000 or less ⇐

CONTRACTOR DATA	Fed Tax ID _____	Date started in Business _____
Type of Business:	<input type="checkbox"/> Partnership	<input type="checkbox"/> (S) Corporation
	<input type="checkbox"/> (C) Corporation	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> LLC	<input type="checkbox"/> LLP
Company Name (Include DBA) _____	Phone _____	
Company Address _____	City _____	State _____ Zip _____
Type of Work _____	Territory of Operations _____	
Largest job completed in last 5 years - Contract Price \$ _____	Job Description: _____	
Uncompleted bonded jobs? (If yes, provide: Amount(s), Surety, Agency, % Complete, Completion Date, Disputes?)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

OWNER DATA / INDEMNITORS (Provide the information below on all owners; use additional sheet if necessary)

Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
SS# _____ DOB _____	SS# _____ DOB _____
% of Business Ownership _____ Married <input type="checkbox"/> Yes <input type="checkbox"/> No	% of Business Ownership _____ Married <input type="checkbox"/> Yes <input type="checkbox"/> No
Spouse Name _____	Spouse Name _____
Spouse Employer _____	Spouse Employer _____
Spouse Annual Income \$ _____	Spouse Annual Income \$ _____
SS# _____ DOB _____	SS# _____ DOB _____

Credit Reports will be obtained during the underwriting process.

BOND REQUEST DATA	If no bond is needed at this time, but only prequalification for future bonding, check here <input type="checkbox"/>	Anticipated Start Date _____
Time for Completion _____	Liquidated Damages per Day \$ _____	Maintenance Period _____
Obligee (Who is requiring the contractor get a bond?) _____		
Obligee Address _____	City _____	State _____ Zip _____
Job Legal Description _____		
Job Physical Address _____		
Subcontracted Portion _____	Cost of Materials _____	

Check and Complete: (For private jobs or subcontracts, please enclose a copy of the contract and bond forms)

(check one only)

<input type="checkbox"/> Bid Bond:	<input type="checkbox"/> Final Bond: Contract Price \$ _____
Bid date _____	Contract Date (Date when contract is signed) _____
Estimated total amount of bid: \$ _____	<input type="checkbox"/> Performance & Payment Bond
Bid Bond % or flat amount _____	<input type="checkbox"/> Supply Bond
Status of Outstanding Bid Bonds:	<input type="checkbox"/> Subcontractor Performance & Payment Bond
Owner: _____ Awarded? <input type="checkbox"/> Yes	<input type="checkbox"/> Stand Alone Maintenance Bond \$ _____
Owner: _____ Awarded? <input type="checkbox"/> Yes	Bid secured by: Check <input type="checkbox"/> Bond <input type="checkbox"/> Negotiated <input type="checkbox"/>
	Next two lowest bidders
	\$ _____ \$ _____

BOND FORM DATA

<input type="checkbox"/> Surety's Form	<input type="checkbox"/> Obligee Form	<input type="checkbox"/> AIA Form	<input type="checkbox"/> State Form	<input type="checkbox"/> Federal Contract # _____
	(Send copy for review)		(Send copy for review)	

NOTICE TO THE OWNERS/INDEMNITORS NAMED IN THE APPLICATION

This application will be reviewed primarily on the basis of your PERSONAL credit history. By submitting this application, you are certifying all of the foregoing information as accurate and authorizing Goldleaf Surety Services and the surety companies it works with to pull a credit report on you.

Any person who knowingly and with intent to defraud any insurance company or person files an application containing any materially false information - or conceals, for the purpose of misleading, information concerning any fact material thereto - commits a fraudulent insurance act, which is a crime under applicable law. By submitting this application, you also certify the truth of all statements in this application and all supplementary information you have supplied, and you authorize the foregoing companies to verify this information and to obtain additional information from any source.

Signature of Owner #1 X _____	Signature of Owner #2 X _____
Spouse's Signature X _____	Spouse's Signature X _____

To whom should this bond be delivered? _____ By When?: _____

If overnight needed, please specify: ☐ FedEx ☐ UPS ☐ Express Mail **OTHER?:** _____

Credit Authorization

Each Indemnitor authorizes the surety and Goldleaf Surety Services, LLC to obtain information from third parties, including personal credit reports, in connection with the Surety's underwriting and each Indemnitor's compliance with indemnity agreements, bonded contracts and bonds. Each Indemnitor releases such third parties from liability resulting from the provision of such information.

Fraud Notices: Please review the statutory fraud notice applicable to your state.

Arkansas, Louisiana, Maryland, New Mexico and West Virginia: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Florida: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Tennessee, Maine, Virginia, and Washington: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Kentucky: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

New Jersey: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for such violation.

Pennsylvania: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Oklahoma: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Ohio: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Arizona: For your protection, Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

THE PRIVACY POLICY OF GOLDLEAF FINANCIAL, LTD.

The following is a statement of the Privacy Policy that we have implemented with all of our companies. The nature of our business (helping individuals and businesses obtain the surety bonds they need) requires us to gather personal, financial and business information about you. We deeply respect your privacy, and we appreciate the confidence you place in us each time you provide us with information or permit us to obtain information about you from other sources.

- **The Information We Collect.** Since surety is a form of credit, the information we collect usually includes information regarding your financial condition and your credit history. It also may include references regarding personal characteristics, contractual relationships, banking relationships and your performance of and exposure to risks similar to the risk(s) to be bonded.
- **Where It Comes From.** Most of the information we collect comes directly from you or is obtained with the assistance of data provided by you. This information may come from standard forms that you complete and return to us, or it may come from third parties. Some of the information we obtain is private information, and some of it is publicly available.
- **Identity of the Third Parties from Whom We Obtain Information.** The third parties from whom we obtain information may include other agents we understand to be working for you, accountants and other professionals we understand to be working for you, surety companies that have written bonds for you in the past, consumer credit reporting agencies, business information reporting agencies, persons or entities that employ you (or for whom you perform services), and other business, banking and credit references that you may identify for us. The third parties also may include persons or entities willing to provide credit assistance on your behalf. If you are a company, we also may obtain information about you from your owners.
- **Additional Information We May Collect.** Once you have obtained a surety bond with our assistance, we may collect additional information about you through your transactions with us. This information may include bond numbers for any bonds issued with our assistance, information regarding collateral you may provide as security to us or the surety company, ongoing facts and information relating to the bonded risks, claims brought or threatened against you, and a variety of facts and information relating to the release, expiration, cancellation, release and/or renewal of any bonds.
- **How We Disclose the Information We Collect to Provide Products and Services.** We generally disclose information we collect only to surety companies we consider appropriate to your request(s) for surety credit. On occasion, we also may disclose the information to agents, accountants, bankers and other professionals we understand to be working on your behalf. These disclosures occur by telephone, facsimile transmission, e-mail, U.S. Mail and/or standard courier services.
- **The Purpose of These Disclosures.** The main purpose we have in disclosing information we collect about you is to help you obtain the surety bonds you need or establish the terms and conditions upon which surety credit can be extended to you. Other purposes may include updating your files from time to time, investigating risks that have been bonded for you (and/or claims that are threatened or have been brought against you), investigating or assisting in situations that may affect your surety credit, and determining and collecting premiums, commissions and other charges that may be due from you.
- **Your Authorization of the Foregoing Disclosures.** All of these disclosures are authorized by your signature on the Questionnaire, the Personal Financial Statement and/or other signed authorizations you provide to us.
- **How We Protect the Information We Collect.** Our company has adopted physical and procedural safeguards to protect the information we collect, and we regularly remind our employees to respect and maintain those safeguards and rigorously enforce our Privacy Policy. Employees who violate our Privacy Policy (and/or any related procedures) are subject to disciplinary action. With respect to third parties to whom we disclose collected information, federal law requires all of these parties to have and enforce written privacy policies regarding the information we provide to them, and we expect all of them to strictly maintain and enforce their policies. We will consider immediately terminating our contractual relationship with any third party that does not have and actively enforce a written privacy policy that is as strict or stricter than our own.
- **We Do Not Disclose or Sell Information for Any Purpose Unrelated to Your Bonding.** We do not sell or disclose information we collect to any "non-affiliated" parties, whether for marketing or other purposes. We also do not disclose information about you to persons or entities other than those described above, unless you specifically authorize us to do so.
- **We Protect Information We Have Collected About Former Customers.** We do not disclose information collected from or about former customers, except as required or permitted by law.
- **Your Rights.** You have specific rights to see, correct, amend and/or delete personal information we may collect about you. Please see the attached Summary of Your Rights Under the Fair Credit Reporting Act. State law may provide you with additional rights, and we will comply with the law of your state in every case.

Please direct any questions or concerns regarding this Privacy Policy to Jack Anderson, Goldleaf Financial, Ltd.,
P.O. Box 466, Montevideo, MN 56265, or call him @ (toll free) 888-294-6747.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting - to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission’s web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law, and you may contact your state or local consumer protection agency or state attorney general to learn those rights. agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or if you have filed bankruptcy

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance, or employment – must tell you and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request a report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRA’s - to which it has provided the data - of any error.) The CRA must give you a written report of the investigation and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address, and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone – such as a creditor who reports to a CRA – that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA - usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer or prospective employer without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll -free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the list for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the list indefinitely.
- **You may seek damages from violators.** If a CRA, a user and/or (in some cases) a provider of CRA data violates the FCRA, you may be entitled to sue them in a federal court.

For FCRA questions or concerns regarding CRAs and creditors, please contact:

The Federal Trade Commission, Consumer Response Center - FCRA, Washington, DC 20580, or call them at 202-326-3761.