Return to: Barragan Insurance Agency 1132 Suncast Lane Ste 8 El Dorado Hills, CA 95762 Office: (916) 984-9320 Fax: (916) 984-8013 Info@barraganinsurance.com

AGENT USE ONLY
BOND NUMBER

CALIFORNIA CONTRACTORS LICENSE BOND APPLICATION

A		BUSI	NESS INFORMATIO	N					
BUSINESS/ LICENSE NAME						CONTRACTORS LICENSE NUMBER or APPLICATION FEE NUMBER			
IF RME/ RMO, QUALIFY	ING INDIVIDUALS NAME								
ADDRESS						YEARS LICENSED			
CITY/ STATE/ ZIP						LICENSE CLASSIFICATION(S)			
BUSINESS PHONE		BUSINESS FAX				REQUESTED EFFECTIVE DATE			
B INDEMNITOR INFORMATION									
FIRST NAME/ MIDDLE N	JAME/ LAST NAME		DRIVER'S LICENSE NUMBER DATE			BIRTH	SOCIAL SECURITY NUMBER		
HOME ADDRESS						EMAIL ADDRESS			
CITY/ STATE/ ZIP				HOME	HOME PHONE NUMBER		HOME FAX NUMBER		
IN CONSIDERATION of the execution of such bond, the undersigned, individually and, if applicable, on behalf of the above named business entity, hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows: 1. To reimburse American Contractors Indemnity Company and/or U. S. Specialty Insurance Company, referred to hereafter as "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 may incur; 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; any such deposit shall be pledged as collateral security for any bond(s) the Surety may issue or may have issued for any of 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; 5. Surety is authorized to investigate, at any time, any of the undersigned's credit, employment history, and department of motor vehicle records. 6. Surety shall have the right, in its sole and absolute discretion, to determine whether any claims shall be paid, compromised, adjusted, defended, prosecuted or appealed; and 7. In the event of any litigation arising out of or relating to this agreement, Surety shall be entitled to recover its attorneys' fees incurred therein. Regardless of the date of signature, this indemnity is effective as of the date of execution and renewal of the aforementi									
	Signed, sworn to a	and dated this	day of			,·			
X (Authoriz	ted Representative and Individual	(y)	<u>x</u>	(Auth	orized Ro	epresentative ar	nd Individually))	
Agent Name:	Barragan Insurance Agency					Dha	one: 916-98	 4-9320	
Address:	1132 Suncast Lane Ste 8					Fax	040.00		
City,State, Zip	El Dorado Hills, CA 95762						CS Prod No.	17308	