

AGENT USE ONLY
BOND NUMBER

Additional Personal Indemnitor Application California Contractors License Bond

A CONTRACTOR/ PRINCIPAL BUSINESS INFORMATION				
CONTRACTOR BUSINESS/ LICENSE NAME				
ADDRESS			CONTRACTORS LICENSE NUMBER or APPLICATION FEE NUMBER	
CITY/ STATE/ ZIP				
B ADDITIONAL INDEMNITOR INFORMATION				
INDIVIDUAL'S FIRST NAME/ MIDDLE NAME/ LAST NAME			RELATIONSHIP TO PRINCIPAL	
EMAIL ADDRESS		DATE OF BIRTH	SOCIAL SECURITY NUMBER	
HOME ADDRESS/ CITY/ STATE/ ZIP			HOME/ MOBILE PHONE	
<input type="checkbox"/> Own	DATE HOME PURCHASED	PURCHASE PRICE	PRESENT LOAN BALANCE(S)	CURRENT MARKET VALUE
<input type="checkbox"/> Rent				

INDEMNITY AGREEMENT - READ CAREFULLY AND SIGN

IN CONSIDERATION of American Contractors Indemnity Company and/or U. S. Specialty Insurance Company referred to hereafter as "Surety," issuing the bond applied for, the undersigned hereby agree for themselves, their heirs, successors and assigns, jointly and severally:

1. To pay Surety an annual premium in advance each year during which liability under the bond shall continue in force and until satisfactory evidence of termination of the Surety's liability is furnished to the Surety.
2. To indemnify Surety against all losses, liabilities, costs, damages, attorneys' fees and expenses the Surety may incur or has incurred due to the execution and issuance of the bond on, before or after this date including any modifications, renewals or extensions of the bond or the enforcement of the terms of this indemnity agreement.
3. The Surety or its representatives shall have the right to examine the credit history, department of motor vehicle records, employment history, books and records of the undersigned or the assets covered by the bond, or the assets pledged as collateral for the bond.
4. The undersigned agree to waive notice of the execution of the bond, notice of any fact, knowledge or information affecting the undersigned's rights or liabilities under the bond that Surety may have or discover prior to or after execution of the bond.
5. The undersigned, upon written demand, shall deposit with Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety may in its absolute discretion determine is necessary and the deposit shall be pledged as collateral security on any such bond or other bonds the Surety may have issued for the undersigned. The undersigned hereby irrevocably appoints Surety as their attorney in fact to execute any documents necessary to perfect Surety's security interests in any collateral submitted to Surety. Surety shall have the exclusive right to determine if any claim or suit shall be denied, paid, compromised, defended or appealed. An itemized statement of payments made by Surety shall be prima facie evidence of the obligation of undersigned due to Surety. The undersigned agree that it is their responsibility to defend their own interests.
6. Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles County, California, and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles County, California.
7. The rights and obligations of the undersigned are in addition to and cumulative of all other rights, liabilities and obligations under the laws of the State of California. The undersigned confirms that Surety shall have every right, defense or remedy including the rights of exoneration and subrogation.
8. Unless specified by law or stated in the bond that the bond can not be cancelled, Surety may cancel bond by mailing a notice of cancellation in the U.S. mail to the Obligee and Principal at the last address provided to Surety and cancellation shall become effective thirty (30) days after the date of deposit with the United States Postal Service.

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 _____
 Indemnitor's Signature Print Name

Indemnitor's Signature must be notarized.

Agent Name: <u>Barragan Insurance Agency</u>	Phone: <u>916-984-9320</u>
Address: <u>1132 Suncastr lane Ste 8</u>	Fax: <u>916-984-8013</u>
City, State, Zip: <u>El Dorado Hills, CA 95762</u>	HCCS Prod No. <u>17308</u>

**NOTARY ACKNOWLEDGEMENT FOR
Additional Personal Indemnitor Application - California Contractors License Bond**

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document

STATE OF _____

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COUNTY OF _____

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On _____ before me, _____ personally appeared _____

_____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)