

15201 Mason Road Ste 1000 #333 Cypress, TX 77433 281-256-3830 (P) • 281-256-3832 (F) info@americansurety.net

CONTRACTOR'S QUESTIONNAIRE FOR SURETY BONDING

<u>Check one:</u>	Cor	porationPartners	hipProprietorshi	pLLC
Date:	Telephone: ()	Fax: ()	
Contractor:	(Legal name as 1	registered with the state)		
Street Address (not P.O.B	ox):			
City:	State:	Zip:	County	·:
Federal Tax ID Number:		Date Bus	iness Formed:	
for change in the corporat	e ownership or	r structure? (Please	explain)	ears or are there any plans
What type of construction				y the business)
What percentage of a proj	ect does the bu	usiness perform?	(%). What trade	es are typically subbed out?
Are you a union or non-un				
<u>PLEASE LI</u>		<u>NERSHIP INFOR</u> ND SS NUMBER		ER OR NOT:
<u>Name</u>	<u>Age</u>	<u>Position</u>	Ownership (%)	<u>SS#</u>
(0,)				
(Spouse)				

(Spouse)

KEY PERSONNEL:

<u>Name:</u>	Age:	<u>Positio</u>	<u>on:</u>	Years Employed:	Comments:
Total Number of Employees:		N	Jumber of full time offic	ce staff:	
Are there any affiliated c	companies	s? If so,	please explain:		
			INSURANCE:		
Insurance Agency:					
Insurance Agent (name):	·			_Telephone: ()
	(We will	call the c	work HISTOR	_	ion)
<u>Telephone number</u> <u>Y</u>	ear Com	<u>pleted</u>	Contact Person for Reference	<u>Contract</u> <u>Amount</u>	<u>Job</u> <u>Description</u>
()					
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Who was the superintend	If they are not				
employed who replaced	them?				
Normal operating territor	ry?				
argest backlog of work on hand? (\$)				Number of Projects:	
What size projects (single	e projects	s) are you	a looking to Bond?		
Backlog vou feel vour co	ompany n	eeds? (\$	<i>3</i>)	#of jobs at one t	ime:

SUPPLIER INFORMATION:

Telephone:	Contact Person	<u>Product</u>	<u>Company Name</u>		
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• We will conta	act the above as part o	of a routine credit	check		
	<u>6</u>	SURETY INFO	RMATION:		
Present Bond Cor	npany?				
Bond Agent?	Bond Agent?Telephone: ()				
Ever caused a born	nd loss? Yes or No: _	If so	o, please explain?		
		NANCIAL INF	ORMATION:		
Name of accounti	ng firm?		Telephone: ()		
Contact Person?			Used how many years?		
Are tax statement	s for the company cur	rent?	Personal tax returns current?		
Any current Feder	ral Tax liens?	If so	please provide details:		
		Any curre	ent State Tax Liens?If so, please		
provide details: _					
Any Tax payment	plans in place?				
Who prepares the	financial statements i	n-house for the c	company and who is in charge of accounts		
receivable and acc	count's pavable?				

BANK INFORMATION:

Name of Bank:	Contact:	
Address:		
Telephone: ()	Fax: ()	
Bank Line Limit: (\$)	Amount in Use: Date:	
	LEGAL REPRESENTATION:	
Attorney Firm Name:		
Attorney:		
Any current contract dispu	utes?	
Any material or labor lien	s?	
Any lawsuits?		
_	SBA QUALIFICATIONS: lete this portion if applying for the SBA Bond Guarantee Program I or been approved in the SBA program previously?	
Race of owner(s) (i.e. Am	erican Indian, African American, Asian, Pacific Islander, White/Caucasian,	
NAICS Code (if known):_		
	<u>CREDIT AUTHORIZATION</u>	
the assessment of Surety (appropriate Surety Person	ion contained in this application for Surety Bonding to be true and correct for Credit, and authorize American Surety Agency to share this information with nnel in order to assess Surety Credit. By signing this application, I warrant to release the information contained within this application to American Surety Age	ncy.
	Date:	