

## John M. Glover Agency

### Surety Services

Please complete this form and return to:

Abigail Curtiss

ACurtiss@JohnMGlover.com

203.956.2452

### LICENSE / PERMIT / MISCELLANEOUS

BOND No. \_\_\_\_\_

### BOND DATA SHEET

<b>1. AGENT/BROKER INFORMATION</b>	Agency/Broker Name: John M. Glover Agency, Inc.	Producer #	Phone #: 203-956-2452	Fax #: 203-274-9417
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<b>2. BOND INFORMATION</b>	Type of Bond (Attach Bond Form):	Amount of Bond:	Effective Date:
Obligee Name:		Obligee Address:	Expiration Date: (if other than one year)

<b>3. BUSINESS INFORMATION</b>	Company Name (Must be exactly as it appears on the bond):					
Business Phone #:		Business Fax #:		E-Mail:		
Company Address:		City:	State:	Zip Code:	Annual Business Income: \$	Annual Other Income: \$
Nature of Business:		<input type="checkbox"/> Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC		Date Formed (Corp. or LLC):	# of Owners, Partners or Members:	How Long in Business?
Previous Bonding Company:		Reason for Changing Bonding Company:				

<b>4. PERSONAL INFORMATION</b>	Applicants Name:			Social Security #:	Date of Birth:
Spouse's Name:			Social Security #:	Date of Birth:	
Residence Address:			City:	State:	Zip Code:
Estimated Personal Net Worth:					
Are you the Trustee, Trustor or Beneficiary of any Trust?		Ever Declared Bankruptcy?	Pending or Prior IRS Liens?	Any Lawsuits Pending Against You?	Ever declined for Bonding previously?
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Percentage of Ownership:** \_\_\_\_\_ %

<b>5. PERSONAL INFORMATION</b>	Co-Applicants Name:			Social Security #:	Date of Birth:
Spouse's Name:			Social Security #:	Date of Birth:	
Residence Address:			City:	State:	Zip Code:
Estimated Personal Net Worth:					
Are you the Trustee, Trustor or Beneficiary of any Trust?		Ever Declared Bankruptcy?	Pending or Prior IRS Liens?	Any Lawsuits Pending Against You?	Ever declined for Bonding previously?
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Percentage of Ownership:** \_\_\_\_\_ %