# JOHN M. GLOVER
## INSURANCE AGENCY
### EST. 1916

PO Box 700, Norwalk, CT 06852
Ph: 203-838-5554 | Fax: 203-274-9445
**www.jmg.com**

# BOND REQUEST WORKSHEET

**CONTRACTOR & ADDRESS:** _____

_____

_____

**OBLIGEE:** _____
(Who is asking for the bond)

**OBLIGEE'S ADDRESS:** _____

**OBLIGEE'S EMAIL ADDRESS:** _____

**PROJECT NAME:** _____
**PROJECT ADDRESS:** _____

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☐ **BID BOND**

**DATE OF BID:** _____

**BID ESTIMATE:**
(INCLUDING ALTERNATES)     $ _____

**BID BOND %:** _____ %

☐ **PERFORMANCE BOND**
☐ **LABOR & MATERIAL PAYMENT BOND**
☐ **MAINTENANCE BOND**

**CONTRACT DATE:** _____

**CONTRACT AMOUNT:** $ _____
(INCLUDE BID RESULTS BELOW)

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**TYPE OF BOND FORM REQUIRED:** _____

**NO. OF ORIGINALS NEEDED:** _____     **NO. OF COPIES NEEDED:** _____

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**JOB COST BREAKDOWN**

**LABOR:** _____ %

**MATERIALS:** _____ %

**SUBS:** _____ %

**PROFIT:** _____ %

**LIQUIDATED DAMAGES:** $ _____

**CURRENT WORK ON HAND:** $ _____

**BID RESULTS, IF KNOWN:**
1) _____
2) _____
3) _____

**COMPLETION TIME (DAYS):** _____

**START DATE:** _____

**COMPLETION DATE:** _____

**RETAINAGE:** _____ %

**MAINTENANCE/ WARRANTY PERIOD:** _____ yrs.

**BONDED?**     ☐ Yes     ☐ No

**ENGINEER/ ARCHITECT ESTIMATE:** $ _____

**SCOPE OF WORK:** _____

_____

_____

**DELIVERY INSTRUCTIONS:** _____

**REQUESTED BY:** _____     **DATE:** _____

**APPROVED BY:** _____     **DATE:** _____

*The Contractor acknowledges the accuracy of the aforesaid information and will in no way hold JMG Insurance Corp liable for any inaccuracies due to data presented in error by or on behalf of said Contractor.*