

**PREMIUM less REBATE:**

License #: \_\_\_\_\_ **Issue My Bond Effective:** \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ **Email:** \_\_\_\_\_

1 Year = \$349\*

\* Actual rates may vary dependent upon approved credit.

**INDEMNITY AGREEMENT - PLEASE READ CAREFULLY AND COMPLETE THE FORM BELOW**

IN CONSIDERATION of the execution of such bond, the undersigned individually and if applicable, on behalf of the partnership, corporation or LLC, hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

- 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 incurs;
- 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;
- Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgement that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned;
- The place of performance of this agreement, including the promise to pay Surety, shall be Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California; and
- Surety is authorized to investigate, at any time, the undersigned's credit, employment history and department of motor vehicle records.





Regardless of the date of signature, the 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).

- BROKER OF RECORD AUTHORIZATION** - Effective immediately, the undersigned hereby agrees to appoint Economy Bonds & Insurance Services as their agent of record on contractor's license bonds with American Contractors Indemnity Company. This appointment supersedes all previous appointments of any other Broker of Record.
- If **SOLE PROPRIETORSHIP**, the owner must sign as individual indemnitor       If **PARTNERSHIP**, a partner must sign for the partnership and as an individual indemnitor       If **CORPORATION**, the president must sign for the corporation and as an individual indemnitor       If **LLC**, a member must sign for the LLC and as an individual indemnitor

**IF BOND OF QUALIFYING INDIVIDUAL (RMO/RME) IS REQUIRED, PLEASE COMPLETE APPLICATION ON REVERSE SIDE**

Print Full Name (As individual indemnitor and if applicable, on behalf of the partnership as a partner or on behalf of the corporation as an authorized representative)	Signature <b>X</b>	Date of Birth
Social Security Number	Date Signed	Driver's License Number or California ID Number

**YOUR BOND WILL AUTOMATICALLY BE FILED WITH THE CSLB AND A COPY WILL BE SENT TO YOU**

<p>If paying by check, please make your check payable to: <b>Economy Bonds.</b></p> <p>Instructions for obtaining a bond can be found on the reverse side.</p>	    <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Name on Card	
		Card Number	
		Exp. Date	CVV
		Signature <b>X</b>	Date
Amount of Charge \$			

**Thank you for placing your bond coverage with Economy Bonds!**

# \$12,500 BOND OF QUALIFYING INDIVIDUAL (RMO / RME)

COMPLETE ONLY IF A BOND OF QUALIFYING INDIVIDUAL IS REQUIRED

RMO - Responsible Managing Officer

RME - Responsible Managing Employee

1 Year

2 Year

3 Year

4 Year

Qualifying Individual's Name

Qualifying Individual's License or Application Fee Number

Business Name

Street Address

License Classification(s)

City, State, Zip

Issue my bond effective (date)

Phone Number

Fax Number

Email Address

## R.M.O. or R.M.E. INDEMNITY AGREEMENT - PLEASE READ CAREFULLY AND COMPLETE THE FORM BELOW

**IN CONSIDERATION** of the execution of such bond, the undersigned individually and if applicable, on behalf of the partnership, corporation or LLC, 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 incurs;
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 judgement that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned;
4. The place of performance of this agreement, including the promise to pay Surety, shall be Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California; and
5. Surety is authorized to investigate, at any time, the undersigned's credit, employment history and department of motor vehicle records.

Regardless of the date of signature, the 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).

Print Full Name	Signature <b>X</b>	Date of Birth
Social Security Number	Date Signed	Driver's License Number or California ID Number

## RMO/RME BOND RATES ARE LISTED ON THE FRONT OF THIS APPLICATION

### INSTRUCTIONS FOR OBTAINING A BOND

1. Complete an online application at [www.economybonds.com](http://www.economybonds.com). You will be able to complete the application and purchase the bond online. No paperwork is required.

OR

1. Complete the application. Please make sure to provide a phone number, social security number and signature.
  2. Make check payable to Economy Bonds for the term of your choice or fill out the credit card section on the reverse.
  3. Mail the above to us at: Economy Bonds & Insurance Services, P.O. Box 276165, Sacramento, CA 95827-6165
- If paying by credit card, you may also fax it to us at (916) 856-5048.

Your bond will be electronically filed with the CSLB. You should receive a copy of your bond in the mail shortly thereafter. You will receive a bond ID card with your bond information approximately two weeks after bond issuance, if you are currently licensed. New applicants will receive their bond ID card after their license has been issued. If you have any questions, call us toll-free at (800) 278-0689.

WEB