AGS SURETY.COM
INSURANCE AND BONDING

SPEEDY APP

TYPE OF BOND	AMOUNT $	EFFECTIVE DATE	TERM	SOCIAL SECURITY NO.
NAME (MUST BE EXACTLY AS IT IS TO APPEAR ON BOND)		BUSINESS PHONE		BUSINESS FAX
BUSINESS STREET ADDRESS	CITY	STATE	ZIP	☐ INDIVIDUAL ☐ CORPORATION ☐ PARTNERSHIP ☐ LLC
NATURE OF APPLICANT'S BUSINESS	CLASS OF CONTRACTORS LICENSE	TAX ID FOR CORPORATION OR PARTNERSHIP		DATE STARTED
HOME ADDRESS				HOME PHONE

INDEMNITY AGREEMENT - READ CAREFULLY AND SIGN

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned individually hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

1. To reimburse Surety upon demand for all payments made for and to indemnify Surety from:

   a) all loss, contingent loss, liability and contingent liability, claim, expense, including attorneys' fees, for which Surety shall become liable or shall become contingently liable by reason of such suretyship, whether or not Surety shall have paid same at the time of demand; and
   b) 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 as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee.
   c) Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment 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.

2. Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California.

3. 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, this indemnity is effective as of the date of execution 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)

Date _____

If Individual - Sign Below

✔_____ ✔_____
Signature Signature - Spouse

_____ _____
Printed Name Printed Name

Soc. Sec. # _____ Driver's Lic. # _____ Soc. Sec. # _____ Driver's Lic. # _____

If Partnership - Sign Below

_____
Name of Partnership

✔_____
Signature - Partner & Individually

_____
Printed Name

Soc. Sec. # _____ Driver's Lic. # _____

✔_____
Signature - Partner & Individually

_____
Printed Name

Soc. Sec. # _____ Driver's Lic. # _____

If Corporation - Sign Below

_____
Name of Company

✔_____
Signature - President & Individually

_____
Printed Name

Soc. Sec. # _____ Driver's Lic. # _____

✔_____
Signature – Secretary

_____
Printed Name

P.O. Box 751883, Las Vegas, NV 89136 Ph: (800) 223.0370 ~ Fax: (800) 355.6596