



APPLICATION/QUESTIONNAIRE FOR CONTRACT BONDING

**Contractors Bonding &
Insurance Company**
1213 Valley Street
P.O. Box 9271
Seattle, WA 98109-0271
*For the CBIC branch
nearest you, call Toll Free*
(888) 283-2242
(888) 293-2242 FAX

Agent: _____ Phone: () _____

E-mail: _____ Fax: () _____

I. Organization and Background

1. Company Name _____
(The company name is the entity for which bonding is requested and is referred to in the surety business as the Principal. The name of the company must be its exact legal name.)

2. This company is a: Sole Proprietorship _____ Partnership _____ Corporation _____ Joint Venture _____ LLC _____

3. Is the company a parent, subsidiary, affiliate or division of another entity? Yes _____ No _____

If yes, name of entity(s) _____

4. How long in Business? _____ If incorporated, incorporation date ____/____/____ State _____

5. Company Address _____

City _____ State _____ Zip _____

Company Phone: (____) _____ Company Fax Number: (____) _____ E-mail Address: _____

6. List any License or Permit Bonds that your company is required to provide _____

7. List all owners, officers and/or partners of the company and attach resumes for each:

Name _____ Name _____

Address _____ Address _____

Home Phone # (____) _____ Home Phone # (____) _____

Date of Birth _____ Date of Birth _____

Soc. Sec. # _____ Soc. Sec. # _____

% Ownership _____ % Ownership _____

Company Position _____ Company Position _____

Spouse Name _____ Spouse Name _____

Soc. Sec. # _____ Soc. Sec. # _____

Name _____ Name _____

Address _____ Address _____

Home Phone # (____) _____ Home Phone # (____) _____

Date of Birth _____ Date of Birth _____

Soc. Sec. # _____ Soc. Sec. # _____

% Ownership _____ % Ownership _____

Company Position _____ Company Position _____

Spouse Name _____ Spouse Name _____

Soc. Sec. # _____ Soc. Sec. # _____

8. List company's key employees, such as project managers, estimators, superintendents, other than those persons listed in question #7, and indicate their construction experience (Resumes for each containing the necessary information can be substituted):

Individual's Name	Present Position	Yrs. of Const. Exp.	Age	Summarize experience and education	List Two Prior Employers

9. Is a Buy-Sell agreement in effect? _____ If so, include copy. If no Buy-Sell, what are plans for continuity of firm in event of major owner's death? _____ Funded by Life Insurance? Yes _____ No _____
10. Has a Trust been established for ownership of personal and/or corporate assets? Yes _____ No _____

II. Operations

11. Give a brief description of the type of work you engage in _____

12. Profile of work:

a		b		c		d	
%	Classes of Construction	%	Type of Owner	%	Work Performed as	Trades kept in house	
	General Building		Residential		Subcontractor		
	Engineering		Public		Prime Contractor*		
	Underground		Commercial		*If any % as prime, answer column d		

Do you engage in any asbestos abatement or hazardous waste removal contracts? Yes _____ No _____

13. Territory (Present and Planned) _____

14. What percentage of an average job is: Labor? _____ Material? _____ Subcontracted? _____

15. Normal Work Program (Bonded and Unbonded Jobs):

Average Job Size: (From) \$ _____ (To) \$ _____

Average Total Work on Hand: (From) \$ _____ (To) \$ _____

16. Largest work on hand in the past \$ _____ Year _____

17. Bonding capacity desired: Single job size \$ _____ Total work on hand \$ _____

18. List the five largest contracts completed in the last three years:

Owner	Kind of Work and Location	Name, Phone Number, and Fax Number of Person to Contact	Approximate Contract Price	Year Completed	Final Gross Profit

19. Has the company, any owner, officer, or partner of the company, or any business owned by any of them, ever been bonded?

Yes _____ No _____. If yes, for each bond list:

Person or Entity Bonded	Type of Bond	Surety	Dates	Amount

Explain why surety was changed _____

Has any collateral been deposited with any prior Surety? Yes _____ No _____. If Yes, amount \$ _____

Has collateral been released? N/A _____ Yes _____ No _____

Were any bonds SBA guaranteed? Yes _____ No _____

Was an Escrow/Disbursement Service Used? Yes _____ No _____

20. Has the company, any officer or partner, or any business owned by any of them had a bond request declined?

Yes _____ No _____. If yes, for each declined request, list:

Person or entity requesting bond	Surety	Size of Bond	Reason declined

21. Please list names, phone numbers and fax numbers of architects or engineers familiar with your work:

22. Please list the 3 most recent jobs you have bid, including jobs you did not get:

Job	Bid Date	Your Approximate Bid	Approximate Lowest and Highest Bids Other Than Yours

23. List 3 major suppliers and 3 major subcontractors:

Name	City/State	Phone	Fax
		()	()
		()	()
		()	()
		()	()
		()	()
		()	()

III. Accounting, Banking and Insurance

24. Do you use a C.P.A.? Yes _____ No _____. If yes, please give name and phone _____

25. Fiscal Year End _____. Basis of financial statements: Cash Completed Job Accrual % of Completion

26. Have stockholders elected to be considered an "S Corporation?" Yes _____ No _____

27. On what basis are taxes paid? Cash Completed Job Accrual % of Completion

28. On what level of assurance are financial statements prepared? CPA Audit Review Compilation Unaudited

29. How often are financial statements prepared? Annually Semi-annually Quarterly Monthly

30. There have _____ or have not _____ been **IMPORTANT CHANGES** since the date of the last financial statement.* If there have been important changes, a copy of the last financial statement with notes explaining the **IMPORTANT CHANGES** must be attached, and the notes must be signed by an owner or officer of the company.

31. Name/Address of Bank _____

32. Bank Officer _____ Phone () _____

33. Line of credit established \$ _____ Expiration Date _____ Current portion borrowed \$ _____

34. Type of security required by bank _____

35. **INSURANCE INFORMATION**

Liability Insurance Company _____

Liability Insurance Agent and phone (if different than Surety agent) _____

Workmens Comp. Insurance Company _____

Agent for Workmens Comp. (if different than Surety or Liability agent) _____

Life Insurance information:

Name	Insurance Co. Name	Amount	Beneficiary

***IMPORTANT CHANGES** that must be reported are changes exceeding 25% in the following categories: cash, accounts receivable, inventory, accounts payable, notes payable and taxes due.

IV. Disputes, Financial Difficulties, Problems, Etc.

36. Please check YES or NO to the following questions:	Company	Any officer, owner or partner
Has the company or any officer, owner or partner ever:		
a. Failed in business	Yes ___ No ___	Yes ___ No ___
b. Declared bankruptcy, including successful and unsuccessful Chapters 11 and 13	Yes ___ No ___	Yes ___ No ___
c. Had an ownership interest in a company that declared bankruptcy, including successful and unsuccessful Chapters 11 and 13	Yes ___ No ___	Yes ___ No ___
d. Failed to complete a job or been assessed with delay damages	Yes ___ No ___	Yes ___ No ___
e. Had a bond cancelled by a Surety	Yes ___ No ___	Yes ___ No ___
f. Been in claim with a Surety	Yes ___ No ___	Yes ___ No ___
g. Had any disputes within the last 5 years*	Yes ___ No ___	Yes ___ No ___
h. Been involved with a related company that has had disputes within the last 5 years* (One, but by no means the only, example of related companies is where there is common ownership between or among companies)	Yes ___ No ___	Yes ___ No ___
i. Been involved in any lawsuits in the last 5 years	Yes ___ No ___	Yes ___ No ___
j. Been delinquent in the payment of any taxes**	Yes ___ No ___	Yes ___ No ___
k. Had any tax liens	Yes ___ No ___	Yes ___ No ___
l. Been audited by IRS	Yes ___ No ___	Yes ___ No ___
m. Been delinquent in any contributions to any trust funds***	Yes ___ No ___	Yes ___ No ___
n. Placed or participated in placing any business or personal assets in a trust or escrow	Yes ___ No ___	Yes ___ No ___
o. Restricted or participated in restricting any business or personal assets for any designated purpose	Yes ___ No ___	Yes ___ No ___

If the answer to any of the above questions is yes, please attach a full explanation.

*Disputes include disagreements with owners, suppliers, architects, engineers, laborers and other contractors; disagreements about accounts receivable and payable; bond claims; and other job or contract related disagreements. Disregard minor disputes which were completely resolved within 30 days.

** Taxes include income taxes, withholding taxes like FICA and FUTA, sales taxes, B&O taxes, excise taxes, real and personal property taxes, and any other taxes owed to any government entity.

*** Trust funds include pension and/or profit sharing funds, union trusts, insurance funds (state or private) and similar funds.

**The following statement must be signed by an owner or officer
of the company for which bonding is being requested.**

I acknowledge that all information is complete and correct and is given to induce the insurance company and its general agent to execute surety bonds. I understand that false information may constitute misrepresentation or fraud. I authorize you to investigate the credit, character, capacity and capital of the company and its employees and owners for bonding purposes.

_____ Date

_____ Signature and Title