



Fiduciary Court Bond Application

Name of Applicant: _____

Business / Occupation _____ Date Started _____

Kind of Bond _____ Amount \$ _____ Effective Date _____

- Have you any other surety bonds in force? Yes No
Has any other surety company declined to write this or any previous bond? Yes No
Have you ever had a bond involuntarily terminated or cancelled? Yes No
Has there ever been a claim or legal action against any bond executed on your behalf? Yes No
Do you or any of your companies have any pending lawsuits, unsatisfied judgments or liens? Yes No
Have you or any of your companies declared bankruptcy or become insolvent? Yes No
Have you or any of your companies been the subject to any legal or administrative proceeding resulting in disciplinary action? Yes No
Have you ever been convicted of a felony? Yes No

(If you answered yes to any of these questions, please attach a detailed explanation)

Bond to be filed in the _____ Court of _____ County, State of _____

Court's Address _____

City, State, Zip _____ Telephone #: _____

Name of Ward/Deceased _____ Date of Birth _____

Was a will found? Yes No If yes, attach a copy.

Applicant's relationship to the Ward/Deceased _____

List all parties interested in the estate (i.e., heirs, legatees, devisees, distributees or trust beneficiaries) _____

Attorney's Name _____

Address: _____

City, State, Zip _____ Telephone #: _____

Estate Assets: \$ _____ cash; \$ _____ stocks & bonds (attach a description)

Other: _____; real estate \$ _____

Total liabilities of the estate: \$ _____

- Have you given a bond in the estate before? Yes No
Have you had prior possession of the assets? Yes No
Are you indebted to the estate? Yes No
Is there a going business in the estate? Yes No
Will you give the surety joint control over the estate assets? Yes No
Do you replace a prior fiduciary? Yes No
Does the bond replace a prior bond? Yes No

(If you answered yes to any of these questions, provide complete details on a separate sheet of paper)

IN ADDITION TO A COMPLETED APPLICATION, PLEASE FORWARD

- 1. THE COURT DOCUMENT ASSOCIATED WITH THIS REQUEST
2. THE COURT'S BOND FORM
3. PERSONAL FINANCIAL STATEMENT ON THIS APPLICANT



Universal Service Agency, Inc.
501 Office Center Drive, Suite 128, Ft. Washington, PA 19034-3208
215-646-2400 800-646-2401 (phone) / 215-646-4275 (fax)
sales@universalbonds.com www.universalbonds.com

Your signature on this consent form and completion of the attached application constitutes permission for Universal Service Agency, Inc. to obtain consumer information which will be used to determine bonding eligibility. **This information will be held in the strictest confidence.**

Applicant's signature Print applicant's name Date

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