

**Universal Service Agency, Inc.**

501 Office Center Drive, Suite 128 Ft. Washington, PA 19034-3208  
 (215) 646-2400 phone (800) 646-2401 phone (215) 646-4275 fax  
[sales@universalbonds.com](mailto:sales@universalbonds.com) www.universalbonds.com

**SURETY APPLICATION QUESTIONNAIRE  
 GENERAL INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 (street address) (city) (state) (zip)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Tax ID # \_\_\_\_\_

Circle one: Corporation Partnership Proprietorship LLC Other Date Formed: \_\_\_\_\_

Name of Owner	Social Security #	Corporate Title/Position	% owned	Spouse's name

Has there been any change in ownership of the company within the past 36 months? Yes No

If yes, please explain: \_\_\_\_\_

Is the company/owners connected with other companies as subsidiary, parent, affiliate, etc? Yes No

If yes, please explain: \_\_\_\_\_

List type(s) of work performed: \_\_\_\_\_

List annual gross for the last three years: \$\_\_\_\_\_, 2\_\_\_ / \$\_\_\_\_\_, 2\_\_\_ / \$\_\_\_\_\_, 2\_\_\_

**Five largest contracts COMPLETED in the last three years**

Owner/Person to contact	Phone / Fax	Type of work	Contract amount	Year
	/		\$	
	/		\$	
	/		\$	
	/		\$	
	/		\$	

**Principal Suppliers**

Name	Phone / Fax	Mailing Address	Supplier Type
	/		
	/		
	/		
	/		
	/		

Present/Prior Surety: \_\_\_\_\_ Phone: \_\_\_\_\_

With present surety: \_\_\_\_\_ years. Largest single contract previously bonded: \$\_\_\_\_\_

Has the company or any owner ever defaulted on a contract or caused surety to suffer loss? Yes No

If yes, please explain: \_\_\_\_\_

Does the company own adequate equipment? Yes No and/or lease equipment? Yes No

Has company ever failed to complete a contract? Yes No

If yes, please explain: \_\_\_\_\_

Have there been any disputes on contracts? Yes No

If yes, please explain: \_\_\_\_\_

Has the company, affiliate, or any owner filed for bankruptcy? Yes No

If so, please explain: \_\_\_\_\_

Been in receivership? Yes No

If so, please explain: \_\_\_\_\_

Has the company had liens for labor and/or material filed against it? Yes No

If so, please explain: \_\_\_\_\_

### Financial Information

Accountant: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_ Fax: \_\_\_\_\_

Fiscal year end: \_\_\_\_\_ (month) Are taxes current – both company and personal? Yes No

### Bank Information

Name of Bank: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_ Fax: \_\_\_\_\_

Amount of Line of Credit: \$\_\_\_\_\_ Amount in use: \$\_\_\_\_\_

I/We authorize Universal Service Agency, Inc. to investigate the statements in this application and to check my/our credit and references. I/We certify that the information contained in this application and supporting documents is true and correct.

\_\_\_\_\_ (date)

\_\_\_\_\_  
Signature of principal

\_\_\_\_\_  
Signature of principal

\_\_\_\_\_  
Printed name of principal

\_\_\_\_\_  
Printed name of principal



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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.**

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Applicant's signature                      Print applicant's name                      Date

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Applicant's signature                      Print applicant's name                      Date

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Applicant's signature                      Print applicant's name                      Date

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