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COURT BOND APPLICATION

Date: \_\_\_\_\_

Type of Bond (describe purpose): \_\_\_\_\_

(Attach a copy of the bond form, if available)

Bond Amount: \_\_\_\_\_ Effective Date of Bond: \_\_\_\_\_ Bond Term \_\_\_\_\_

Applicant:  Individual  Partnership  C-Corp  S-Corp  LLC  Sole Proprietor

Applicant (Principal): \_\_\_\_\_

Name to appear on Bond, if different from Applicant: \_\_\_\_\_

Applicant Telephone: \_\_\_\_\_ Applicant Fax: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Business Description or Latest Occupation: \_\_\_\_\_

SS: \_\_\_\_\_ Fed Tax ID: \_\_\_\_\_ U.S. Citizen?  Yes  No

Obligee (Party requiring the bond) : \_\_\_\_\_

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

Obligee Telephone: \_\_\_\_\_ Obligee Fax: \_\_\_\_\_

General Underwriting Questions

Does the Applicant have any other Surety bonds in force?  Yes  No

Has another 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 of any legal or administrative resulting in proceedings disciplinary action?  Yes  No

Have you ever been convicted of a felony?  Yes  No

(If you answered Yes to any of the above questions, please attach a detailed explanation.) \_\_\_\_\_

Judgment / Claim Amount: \_\_\_\_\_

Type of Action: \_\_\_\_\_

Case Number: \_\_\_\_\_ Court Jurisdiction: \_\_\_\_\_

Applicant's Attorney name an address: \_\_\_\_\_

Summary of the Action: \_\_\_\_\_

Does the case involve a domestic dispute?  Yes  No

Attach copy of Complaint, Judgement and Court Order and /or other documents  copies attached

If Applicant is a Corporation or other organization attach current financial statement and tax returns  copies attached

If Applicant is an individual, attach a copy of the most recent financial statement and tax return.  copies attached

This application consists of this instrument, the financial statements and all indemnity, security and trust agreements signed by the applicant with regard to the bond or bonds hereby requested, such financial statement and agreements being incorporated hereby by reference.

In addition to the routine verification of information pertinent to the bond applied for, if the application is by an individual primarily for personal purpose, or if the application is by a corporation or other organization and the said application is executed by the officers of the corporation or organization on behalf of the corporation or organization and in a personal capacity, thereby acting as a co-guarantor thereof, ACSTAR Insurance Company may have an investigative consumer report made including information bearing on the character, general reputation, personal characteristics or mode of living of said individuals(s) and upon written request of said individuals will disclose in writing the nature and scope of the investigation requested.

The representations contained in this application and the financial statements are warranted by the applicant to be true.

WITNESS the following signatures(s) and seal(s) this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

If APPLICANT is an Individual:

Witness: \_\_\_\_\_

Signature: \_\_\_\_\_

(Print above name here): \_\_\_\_\_

(Print above name here): \_\_\_\_\_

Witness: \_\_\_\_\_

Signature: \_\_\_\_\_

(Print above name here): \_\_\_\_\_

(Print above name here): \_\_\_\_\_

If APPLICANT is Partnership or Corporation:

Name of Firm/Corporation: \_\_\_\_\_

(Seal)

Witness: \_\_\_\_\_

Signature: \_\_\_\_\_

(Print above name here): \_\_\_\_\_

(Print above name here): \_\_\_\_\_

Title (Print): \_\_\_\_\_