ALWAYS FAITHFUL INSURANCE AGENCY

Dr. George Rapciewicz Jr., Principal Broker
CA Broker License #4476212 | NPN #21686200 | Licensed P&C Broker in 21 States
Temecula, CA | 650-489-2592 | support@semperfiservicesolutions.com | semperfiservicesolutions.com
California Certified Disabled Veteran Business Enterprise & Small Business #2045250

CONTRACTOR LICENSE AND SURETY BOND QUESTIONNAIRE

This form asks for confidential information. Send the completed form only to support@semperfiservicesolutions.com. We keep your information confidential and use it only to quote and place your insurance.

PRINCIPAL (BUSINESS)

Business Name: _____ DBA: _____

Contact Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____ Phone: _____

Email: _____ Website: _____

Entity: ☐ Individual / Sole Prop ☐ Partnership ☐ Corporation ☐ LLC ☐ Other

FEIN: _____ SSN (sole proprietors only): _____ State of Formation: _____

Years in Business: _____ CSLB / Professional License # (if any): _____ Desired Effective Date: _____

CSLB License #: _____ Classification(s): _____ License Expiration: _____

Owners and Qualifying Individual (each owner of 10% or more)

#	Full Name	Title	Ownership %	Home City / State	Qualifying Individual Y/N
1					
2					
3					
4					

BOND NEEDED

Type of bond (check all that apply):

☐ CSLB contractor license bond
☐ LLC employee / worker bond
☐ Performance & payment bond
☐ Other: _____
☐ Bond of Qualifying Individual
☐ Bid bond
☐ Permit / license bond (city/county)

Bond amount $: _____ Needed by (date): _____ Obligee (who requires it): _____

FOR BID, PERFORMANCE AND PAYMENT BONDS

Skip this section for license bonds. Sureties underwrite contract bonds on the contractor's experience, work on hand and finances.

Project name / owner: _____

Project location: _____ Contract amount $: _____ Bid date: _____

Start date: _____ Completion date: _____ Liquidated damages per day $: _____

Largest job completed (contract $): _____ Year: _____ Work on hand now (total backlog $): _____

Work in progress (current jobs)

#	Project / Owner	Contract $	Billed to Date $	Cost to Date $	% Complete	Bonded? Y/N
1						
2						
3						
4						
5						

Do you have CPA-prepared financial statements for the last fiscal year? ☐ Audited ☐ Reviewed ☐ Compiled ☐ None

Bank / line of credit (bank and amount): _____

HISTORY

Has any surety ever paid a claim or been asked to pay a claim on your behalf? ☐ Yes ☐ No

If yes, explain: _____

Has the business or any owner filed bankruptcy, or have any tax liens or judgments? ☐ Yes ☐ No

If yes, explain: _____

Have you ever failed to complete a contract? ☐ Yes ☐ No

If yes, explain: _____

APPLICANT SIGNATURE

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

The undersigned states that the information provided in this application is true and complete to the best of their knowledge, and authorizes Always Faithful Insurance Agency to submit it to insurance companies for the purpose of obtaining quotations. Submitting this form does not bind coverage; coverage begins only when confirmed in writing by the agency or the insurance company.

The undersigned authorizes Always Faithful Insurance Agency and the surety to obtain credit reports on the business and its owners for the purpose of underwriting this bond. Most sureties also require owners to sign a general indemnity agreement before a bond is issued.

Printed Name: _____ Title (if business): _____

Signature: _____ Date: _____

Sign by typing your name in the signature box, signing with your PDF reader's Fill & Sign tool, or printing and signing by hand. Email the completed form to support@semperfiservicesolutions.com or call 650-489-2592.