



THE MAIN STREET AMERICA GROUP

NGM Insurance Company • Old Dominion Insurance Company
Main Street America Assurance Company • MSA Insurance Company
Information Systems and Services Corporation

License & Permit Bond Application

I have executed the following bond Please send me the following bond

Renewal Option: Agency Bill Direct Bill (Cancelable Bonds Only)

Agency name: Phone: 617-523-2935 Fax: 617-523-1707		Bond #	
A.A. Dority Company, Inc. 262 Washington St. #99 Boston, MA 02108		TBD	
Applicant's name in full:		Tax I.D. # or Social Security #:	
		N/A	
Applicant's address:		License/Permit #:	
		N/A	
Type of Bond:	Amount of Bond:	Effective Date:	Bond Term:
Abutter	1,000.00		1yr
Complete name and address of Oblige:			
Neighbor:			
Experience/Length of time in business:	Prior Bankruptcy or bond claim?:	NGM Insured?/Policy #	
N/A	N/A	N/A	
Agent's Recommendation:			
YES			

Indemnity Agreement

The undersigned, hereinafter called the Indemnitor(s) (if there be more than one Indemnitor they jointly and severally and for each other do) hereby undertake, represent, warrant and agree as follows:

That the foregoing statements made and answers given in the submitted application are the truth without reservation, and are made for the purpose of inducing the NGM Insurance Company, hereinafter referred to as the Company, to execute or procure the execution of a certain bond or undertaking herein applied for. That this Agreement shall apply to the bond or undertaking herein applied for, and any and all extensions, increases, modifications or renewals thereof, or additions or substitutions therefore, any and all such instruments separately and collectively being hereinafter called the Bond. That the Indemnitor(s) shall pay all premiums and renewal premiums as may become due until the Company shall be discharged and released from any and all liability and responsibility under the Bond. That the Indemnitor(s) shall at all times indemnify, save the Company harmless from, and place the Company in funds to meet any claim, demand, loss, liability, costs, charge, attorney's fee, expense, suit, order, judgment, or adjudication arising from the existence of the Bond. That if the Company shall set up a reserve to cover any claim, demand, loss, liability, cost, charge, attorney's fee, expense, suit, order judgement or adjudication arising from the existence of the Bond the Indemnitor(s) shall, immediately upon demand, deposit with the Company a sum of money equal to such reserve, such sum to be held by the Company as collateral security for the Bond obligation. That the Company shall have exclusive right to determine for itself and the Indemnitor(s) whether any claim or suit brought against the Company or the Principal, as a result of the existence of the Bond, shall be settled or defended and its decision shall be binding and conclusive upon the indemnitor(s). That this Agreement shall bind the heirs, executors, administrators, successors and assigns of the Idemnitor(s) . That nothing herein contained shall be in derogation of any right or remedy which the Company might have independently hereof.

"ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SUBJECTS SUCH PERSON CRIMINAL AND CIVIL PENALTIES."

① Signed, Sealed and Dated this 25 day of April, 2019.

Third Party Indemnitor(s) sign below

In consideration of the Surety executing the bond hereinabove applied for, we jointly and severly join in the foregoing indemnity agreement.

② x _____

Witness: anyone except a spouse sign as witness

③ Sign Here:

Indemnitor _____

Typed Name: _____

Home Address: _____