

## **CALIFORNIA CONTRACTORS LICENSE BOND APPLICATION**

A BUSINESS INFORMATION							
BUSINESS/ LICENSE NAME					CONTRACTORS LICENSE NUMBER or APPLICATION FEE NUMBER		
IF RME/ RMO, QUALIFYING INDIVIDUALS NAME							
ADDRESS					LICENSE CLASSIFICATION(S)		
CITY/ STATE/ ZIP							
BUSINESS PHONE BUSINESS FAX					REQUESTED EFFECTIVE DATE		
B INDEMNITOR INFORMATION							
		DRIVER'S LICENSE NUMBER   DATE OF		BIRTH	SOCIAL SECURITY NUMBER		
HOME ADDRESS					EMAIL ADDRESS		
CITY/ STATE/ ZIP			HOME PHONE NUMBER		JMBER	HOME FAX NUMBER	
INDEMNITY AGREEMENT - READ CAREFULLY AND SIGN  IN CONSIDERATION of the execution of such bond, the undersigned, individually and, if applicable, on behalf of the above named business entity, hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:  1. To reimburse American Contractors Indemnity Company and/or U. S. Specialty Insurance Company, referred to hereafter as "Surety", upon demand for all payments made for, and to indemnify Surety from, all loss, claim payments, costs and expenses, including attorneys' and construction consultants' fees, which the Surety may incur;  2. To pay Surety an advance premium for the first year or a fractional part thereof and to pay annually thereafter such annual premium for suretyship until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee;  3. Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety, in its absolute discretion, determines necessary; any such deposit shall be pledged as collateral security for any bond(s) the Surety may issue or may have issued for any of the undersigned;  4. The place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles, California, and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California;  5. Surety is authorized to investigate, at any time, any of the undersigned's credit, employment history, and department of motor vehicle records.  6. Surety shall have the right, in its sole and absolute discretion, to determine whether any claims shall be paid, compromised, adjusted, defended, prosecuted or appealed; and  7. In the event of any litigation arising out of or relating to this agreement, Surety shall be entitled to recover its attorneys' fees incurred therein.  Regardless of the date of signature, this indemnity is effective as of the							
Agent Name: JA-SET INSURANCE AGENCY INC Phone: (800)						one: (800)894-2999	

23232 PERALTA DR, STE 206

LAGUNA HILLS, CA 92653

Address:

City,State, Zip

7782

(949)770-6160

Fax:

HCCS Prod No.