

SUBDIVISION/PLAT SHORTFORM APPLICATION

Maintenance ■ Property Tax ■ Common Facilities
Grading ■ Maintenance Assessments ■ Minor Projects

INSCO INSURANCE SERVICES, INC.
Underwriting Manager for:
Developers Surety and Indemnity Company
Indemnity Company of California

INSTRUCTIONS

Application for small plat, minor subdivision or ancillary subdivision/plat bonds.

Submit completed application and indemnity agreement with:

- Subdivision Agreement, Conditions, Planned Construction Statement or other Contract for which bond is required
- Financial Statement for Principal/Entity
- Personal Financial Statements of Owners
- Engineers Estimate or Cost Analysis for Bonded Work
- Original Bond Forms

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PRINCIPAL INFORMATION Name (Must be exactly as it is to appear on bond) Please Specify "S" Corporation										
timust be exactly as it is to appear on bu		,				□ Individ	pecify □ "S" Corporation ual □ Limited Partnership □ LLC ation □ General Partnership □ Trust			
Puningga Street Address			City	C+.	nto.	Zip	ration			
Business Street Address			City	51	State		relepriorie			
D . O		T 11 1			T		()			
Date Started Tax Ident		iax ident	ification #		Prima	ary Business				
OWNERO										
OWNERS Name Spouse's Name										
Ivanie							opouse's Name			
Residence Address		City		State	Zip		Telephone			
nesidence Address		Oity		Oldio	- .p					
Ownership % Position with Applic		ant		SS#			Drivers License Number & State			
·										
Personal Bank (Name ar	nd Branch)						Telephone			
							()			
Bank Address			Ci	ty		Stat	e Zip			
Name							Spouse's Name			
Residence Address City Ownership % Position with Applicant		City		State	Zip		Telephone			
				Ciaio			()			
		ant		SS#			Drivers License Number & State			
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Personal Bank (Name ar	nd Branch)						Telephone			
	•						()			
Bank Address			Ci	ty		State	Zip			
PROJECT										
Project Description (Tract/Plat #, Project Name and Location)										
Type of Development		# of Units	S	Approximate Acre	eage		Completed Value			
Construction Lender				Name of Loan Officer						
Address of Lender							elephone			
						()			
Prime Contractor						Tel	ephone			
				011)			
Contractors Address City State Zip							Zip			
Work Commencement D	ate	Cur	rent Completion	%		Anticip	ated Completion Date			
Ξ.				BOND	Oblina	/ A F	Describing Dead			
Тур	pe		Amount		Oblige	ee (Agency F	Requiring Bond)			
BONDS REQUIRED Type										
REQUIRED Type	pe		Amount		Oblige	ee				
ATTACH										
ATTACH FORMS Type			Amount		Obligee					
Obligee Address		City		State	Zi	р	Telephone			
							()			
Comments							ı			
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Contact Branch Manager for bonds exceeding \$100,000.

INDEMNITY AGREEMENT - READ CAREFULLY

Each of the undersigned hereby affirms that the foregoing statements made and answers given are the truth and are made to induce Developers Surety and Indemnity Company and/or Indemnity Company of California (hereinafter called Surety) to execute or procure the execution of any and all of the bonds described therein, and any extension, modification, or renewal thereof, addition thereto, or substitution therefore. Each of the undersigned further affirms that he understands the bond applied for is a credit relationship, and hereby authorizes Surety or its authorized agent, Insco Insurance Services, Inc., to gather such credit information it considers necessary and appropriate for purposes of evaluating whether such credit should be granted.

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

- 1. To pay upon demand: and to indemnify and keep Surety indemnified from:
- a. all loss, contingent loss, liability and contingent liability claim, expense, including attorneys' fees, for which Surety may become liable or contingently liable by reason of such suretyship, whether or not Surety has paid same at the time of demand; and
- b. to pay Surety an advance premium for the first year or a fractional part thereof that is fully earned and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee.
- 2. Surety shall have the exclusive right to determine whether any claim or suit shall, on the basis of liability, expediency or otherwise, be denied, paid, compromised, defended or appealed. An itemized statement of payments made by Surety for loss, contingent loss, liability or contingent liability, and/or expense, sworn to by an officer of Surety, or the voucher or vouchers for such payments, shall be prima facie evidence of the obligation of the undersigned to reimburse Surety
- The parties agree that at all times the place and formation of the suretyship herein applied for and the place of performance of any and all obligations that might arise under it shall be the County of Orange, State of California.
- Each of the undersigned agrees to pay the full amount of the foregoing regardless of (a) the failure of the principal to sign any such bond or (b) any claim that other indemnities, securities, or collateral was to have been obtained or (c) the release, return or exchange by Surety with or without the consent of the undersigned, of any indemnity, security, or collateral that may have been obtained or (d) the fact that any party signing this instrument is not bound for any reason.
- 5. The undersigned hereby expressly waive notice from Surety of any claim or demand made against Surety or the principal under the bond, or of any information Surety may receive concerning the principal, or bond. Surety shall have the right to decline any or all bonds herein applied for, and shall have the right to withdraw from, or cancel, or procure its release from such suretyship at any time, all without incurring any liability to the undersigned.
- Whenever used in this instrument the plural term shall include the singular and the singular shall include the plural, as the circumstances require. If any portion of this agreement be in conflict with any law controlling the construction hereof, such portion of this instrument shall be considered to be deleted and the remainder shall continue in full force and effect.
- 7. If this transaction is conducted by facsimile or electronic communication, the undersigned will retain custody of the original document. In the event of any controversy over the content of this document, a facsimile, photocopy, electronic or optical reproduction shall be admissible in a court of law with the same force
- 8. This agreement is a continuing obligation of the principal and indemnitor and may be terminated only upon written notification delivered by registered mail to Surety at it's home office. Such notice shall state the effective date of such termination, which shall, in no event, be less than 30 days following receipt of such notice by Surety. No termination of this agreement shall relieve any principal or indemnitor of any obligation or liability under this agreement, or the bond, occurring during the term of this agreement, regardless of when such obligation or liability shall become known to Surety; nor shall termination of this agreement by any indemnitor in any way affect the obligation or liability of any other indemnitor or principal who has not given such notice.

In consideration of the execution by Developers Surety and Indemnity Company and/or Indemnity Company of California of the suretyship applied for, each of the undersigned.

jointly and severally, agrees to be bound by all of the terms of the forest the sole applicant named herein, and admit to being financially interest								
Signed this day of	, <u></u>	·						
	IMPORTANT							
If a Sole Proprietorship, applicant must sign. Applicant and spouse n	nust sign personal indemnity below	N.						
If a Partnership, two authorized partners must sign on behalf of the firm. The two authorized partners and their spouses must sign personal indemnity below.								
If a Corporation, two corporate officers must sign below on behalf of If a Limited Liability Company, two managers/members must sign on Indemnity below.	·	•	•					
(Company Name)		(Ir	demnitor)					
Ву:								
(Name/Title)		(5	ignature)					
(Signature)		(Spous	se's Signature)					
By:								
(Name/Title)		(Ir	demnitor)					
(Signature)		(5	Signature)					
		(Spous	ee's Signature)					
AGENCY	CONTACT PERSON	PHONE	PRODUCER CODE					