



jcrawford@ccisurety.com ★ www.ccisurety.com ★ 866.317.3294 ph ★ 763.512.0430 fax

SBA Quick Program Application

1. WHY DID YOU CONTACT CCI SURETY? (mark all that apply)	Referred? Company? _____ Individual? _____	Marketing? Call Email Visit Other	Past Business? Contract Bonds Comm. Bonds	Web Search? Search Words?
--	--	--	---	------------------------------

2. CONTRACTOR INFORMATION	Company Name (As Appears on Bond)		Business Phone # :	Email :
Company Address:		City:	State:	Zip Code:
Annual Business Income:				
Current Ownership Since:	Proprietorship Corporation	Partnership LLC	Date Formed	# of Owners, Partners or Mem.
FED ID #	Previous Surety: Reason For Changing Surety:			
Approximate Business Net Worth:	Largest Completed Contract:		Largest Completed Program:	
Average Annual Receipts (last 3 yrs + affiliates)			# of Employees:	

3. PROJECT INFORMATION	Contract/Bid Amount:	Bid and Date Time :		Bid % :
Project Owner/ Obligee: Obligee Address:	Start Date:	Completion Date:	Maintenance Period:	Liquidated Damages:
Bond Form (Please Attach) AIA Federal Other _____	Approx. % Subcontracted:	#Approx. % Materials:	Est. Gross Profit?	
Job Description				

4. BID SPREAD INFORMATION (next 3 contractor bids, Name – Bid Amount)	
1.	\$
2.	\$
3.	\$

5. BANK REFERENCE Bank:	Contact Name:	Line of Credit Limit:	Date of Information:
	Phone or Email:	Current Outstanding:	Expiration/Renewal Date:

6. PAST PROJECTS				
Project Name: Project Description:	Contract Amount:	Gross Profit:	Completion Date:	Bonded? Yes No
Owner:	Contact:	Phone/Email:	Project Location (City/State):	
Project Name: Project Description:	Contract Amount:	Gross Profit:	Completion Date:	Bonded? Yes No
Owner:	Contact:	Phone/Email:	Project Location (City/State):	
Project Name: Project Description:	Contract Amount:	Gross Profit:	Completion Date:	Bonded? Yes No
Owner:	Contact:	Phone/Email:	Project Location (City/State):	



jcrawford@ccisurety.com ★ www.ccisurety.com ★ 866.317.3294 ph ★ 763.512.0430 fax

7. COMPANY OWNERS						Provide the information for all owners – use additional sheets if necessary (ATTACH PERSONAL FINANCIAL STATEMENT)					
Name:		Social Security:		% Ownership		Net Worth: (Exclude Business)		Do You Own Real Estate?		Assets in Trust?	
Spouse:		Social Security:		% Ownership		Yes No		Yes No		Yes No	
Address:				Are you a partner/office in any other venture? Yes No If yes, name of venture:				Approximate Start Date with Company (mm/year):			
*The following data is collected for the SBA Program only and is for statistical purposes only; it has no bearing on the credit decision. Disclosure is voluntary. One or more boxes for race may be selected.						Male:		Veteran? Service Disabled?		Ethnicity: Hispanic/Latino:	
						Female:				Not Hispanic/Latino:	
						Race: American Indian/Alaska Native Native Hawaiian / Pacific Islander		White Asian		Black / African American	
Name:		Social Security:		% Ownership		Net Worth: (Exclude Business)		Do You Own Real Estate?		Assets in Trust?	
Spouse:		Social Security:		% Ownership				Yes No		Yes No	
Address:				Are you a partner/office in any other venture? Yes No If yes, name of venture:				Approximate Start Date with Company (mm/year):			
*The following data is collected for the SBA Program only and is for statistical purposes only; it has no bearing on the credit decision. Disclosure is voluntary. One or more boxes for race may be selected.						Male:		Veteran? Service Disabled?		Ethnicity: Hispanic/Latino:	
						Female:				Not Hispanic/Latino:	
						Race: American Indian/Alaska Native Native Hawaiian / Pacific Islander		White Asian		Black / African American	

9. ADDITIONAL SBA INFORMATION – You may be asked to provide additional information to expedite bond approval			
Has the contractor ever had an SBA Loan? If yes, Yes No Loan#		Is the contractor SBA 8(a) Certified? Y N	
		Is the contractor an SBA Certified HUB Zone Contractor? Y N	
		Has the contractor ever defaulted on any previous surety bonds? Y N	
Has contractor received SBA Surety Bond Guarantee under current or another business name? If yes, Yes No Business Name: Tax ID or SSN:		Has the contractor ever failed to complete a job? Y N	
		Is the contractor presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from transactions with any Federal Department or agency? Y N	

10. ADDITIONAL INFORMATION – You may be asked to provide additional information to expedite bond approval			
Do you currently work with a CPA? Firm Yes No Name:		Type of Financial Reports available? (check all applicable) In-House CPA Compiled CPA Reviewed	
		CPA Contact: Name: Phone:	
Do you have Legal Representation? Yes No		Name of Law Firm: Name of Contact:	
		Phone: Email:	

Credit Release Authorization: I/we authorize Construction Capital, Inc. and/or CCI Surety, Inc. to investigate the information contained with any and all information submitted including, but not limited to the application, financials, etc. with any and all creditors and/or lending institutions and prior Surety credit.

SIGNATURE

NAME & TITLE

DATE

*Bid bonds require copy of bid specifications.

*Performance/Payment bond require copy of the contract