

## <u>icrawford@ccisurety.com</u> ★ www.ccisurety.com ★ 866.317.3294 ph ★ 763.512.0430 fax

1. WHY DID YOU		Referred?				Marketing? Past F			st Business?		Web	Web Search?	
CONTACT CCI		Company?			Call	Call Email		Contract Bonds			Search Words?		
SURETY?		Individual?			Visit	Visit Othe		her Comm. I		Bonds			
(mark all that apply)													
2. CONTRACTOR INFORMATION	Comp	any Na	me (As Appea	ars on B	Bond)								
Company Address:											Busine	ess Phone # :	
City:	State:	:	Zip:		Normal (	Operat	ing Territory:				FED I	D#	
	Propri S-Corj		ip Partne C-Cor		LLC	Da	te Formed		# of Emplo	oyees	Type o	of work:	
Approximate Business Net Wor	th:	Large	est Completed	Contrac	ct:	Lar	gest Complete	d Progr	ram:	Averag	e Annual	Receipts (last 3 yrs + affiliates)	
Previous Surety:		Reaso	on For Changi	ng Suret	y:								
					T = v · · ·								
3. PROJECT INFOMRATION	Contr	act/Bid	Amount:		Bid and	Date 7	Time :					Bid %:	
Project Owner/ Obligee:				Start I	Date:		Completion	Date:	Maint	enance	Period:	Liquidated Damages:	
Obligee Address:				<u> </u>			Obligee Cor	ntact Fo	r Bonds:		Obligee	Phone:	
Bond Form (Please Attach)			tracted:	% Materials:			Est. Gross Profit:				Obligee Email:		
AIA Federal Other													
Job Description													
4. BID SPREAD INFOR	RMAT	TION	(next 3 cor	ntracto	or bids, N	ame -	– Bid Amoı	ınt)					
1.										\$			
2.										\$			
3.										\$			
5. BANK REFERENCE	1		Contact Nar	me:			Line of Credi	:	Date of Int		formation:		
Bank Name:			Phone or En			Current Outst	:	n/Renewal Date:					
6. PAST PROJECTS												T	
Project Name: Project Description:					Contract A	Amour	nt: Gross Pro	ofit:	Comp	letion l	Date:	Bonded? Yes No	
Owner: Contact: Pl				Phone/l	Phone/Email:				Projec	Project Location (City/State):			
Project Name: Project Description:					Contract A	Amour	nt: Gross Pro	ofit:	Comp	letion 1	Date:	Bonded?	
Owner:	Contac	ct:		Phone/l	Email:				Projec	t Loca	tion (City	Yes No  //State):	
Project Name: Project Description:	<u>I</u>				Contract A	Amour	nt: Gross Pro	ofit:	Comp	letion 1	Date:	Bonded? Yes No	
Owner: Contact:			Phone/Email:				Projec	Yes No Project Location (City/State):					



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7. COMPANY OWNERS Provide information for all owners – use additional	al sheets if ne	ecessary (AT	TACH PERSONAL FINA	ANCIAL STATEMENT)
Name/Title:		Social Sec	urity:	% Ownership
Spouse:		Social Sec	urity:	% Ownership
Address:	Net Worth: (Exclude B		Do You Own Real Estate?	Assets in Trust?
Email:			Yes No	Yes No
Are you a partner/officer in any other venture?  Yes No If yes, name of venture:			Approximate Start Date (mm/year):	with Company
Name/Title:		Social Sec	urity:	% Ownership
Spouse:		Social Sec	urity:	% Ownership
Address:	Net Worth: (Exclude B		Do You Own Real Estate?	Assets in Trust?
Email:			Yes No	Yes No
Are you a partner/officer in any other venture?  Yes No If yes, name of venture:			Approximate Start Date (mm/year):	with Company
res 110 if yes, name of venture.				
Name/Title:		Social Sec	l urity:	% Ownership
·		Social Sec		% Ownership
Name/Title:	Net Worth: (Exclude B	Social Sec		•
Name/Title:  Spouse:		Social Sec	urity:  Do You Own Real	% Ownership
Name/Title:  Spouse:  Address:		Social Sec	urity:  Do You Own Real Estate?  Yes No Approximate Start Date	% Ownership  Assets in Trust?  Yes No
Name/Title:  Spouse:  Address:  Email:		Social Sec	urity:  Do You Own Real Estate?  Yes No	% Ownership  Assets in Trust?  Yes No
Name/Title:  Spouse:  Address:  Email:  Are you a partner/officer in any other venture?	(Exclude B	Social Sec : : : : : : : : : : : : : : : : : : :	urity:  Do You Own Real Estate?  Yes No Approximate Start Date (mm/year):  Surety, Inc. to inve	% Ownership  Assets in Trust?  Yes No with Company

\*Bid bonds require copy of bid specifications. \*Performance/Payment bond require copy of the contract