

UHLE INSURANCE SERVICES

www.pawnbrokerbonds.com

APPLICANT			
NAME (MUST BE EXACTLY AS IT IS ON BOND)	SOLE PROPRIETOR	CORPORATION	PARTNERSHIP
BUSINESS STREET ADDRESS	BUSINESS PHONE ()	Fax ()	
	CITY	ST	ZIP
Name:	Title:	Spouse's name:	Prior Bond Co.
Soc. Sec. No.	D.O.B. / /	Spouse's Soc- Sec: No.	
HOME ADDRESS	Home phone		
	CITY	ST	ZIP
Real Estate Owned	Mortgage	Securities owned	

Has applicant ever; (a) had an application for a bond declined; (b) compromised with creditors; (c) defaulted on a contract; (d) defaulted on a contract forcing a Surety to suffer a loss; (e) experienced a bankruptcy; (f) been in receivership or been liened by a taxing authority? ___ Yes ___ No (If yes to any of the above, attach a full Explanation.)

BOND REQUIRED	
Type of bond:	
Amount:	Effective Date:
To be filed with (Obligee)	
Address:	
PLEASE ENCLOSE ANY ADDITION PERTINENT INFORMATION (I.E. BOND FORMS, APPLICABLE STATUTES AND PERMITS, COURT)	

ADDITIONAL OWNERS OR PARTNERS AS REQUIRED	
NAME:	SPOUSE'S NAME:
Soc. Sec. No.	Spouse's Soc. Sec. No.
Home Address:	Phone:()

BUSINESS INFORMATION	
DATE BUSINESS ESTABLISHED:	
NAME & BRANCH OF BANK:	Bank Reference:
Account No:	Bank Balance: Line of Credit \$
Number of years experience in this field	

FOR MORE INFORMATION CALL

P.O.Box 571195, Tarzana, CA 91357

Phone: (818)345-5666~Toll Free:(866)439-2663~Fax:(818)345-1878

License #0596009

Section III — Complete for Bonds listed in Section II (References as to Character and Business Standing of the Applicant-Include Bank)

Name	Business	Post Office Address

Fraud Warning:

Any person who knowing 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 shall also be subject to civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. *State of NY only.

THE APPLICANT HEREBY AGREES:

In Consideration of the execution by the Surety, of the bond herein applied for the undersigned, hereinafter called the Indemnitor, agrees: **First**, to pay the premium at the Surety's manual rates for the first year and annually in advance thereafter until said Surety is furnished with evidence satisfactory to it of the termination of its liability under the bond; **Second**, to indemnify the Surety against all loss, liability, costs, damages, attorney's fees and expenses whatever, which the Surety may sustain or incur by reason or in consequence of having executed said bond or any continuances, enlargements, modifications or renewal thereof or any new bond issued in continuation thereof or as a substitute therefor. Vouchers or any other evidence of payment by the Surety or any loss, liability, costs, damages, attorney's fees and expenses whatever sustained by it by reason of the execution of said bond or in procuring its release from future liability under said bond shall be prima facie evidence of the fact and extent to the Indemnitors' liability to the Surety; **Third**, the Surety shall have the right, and is hereby authorized, but not required, to adjust, settle, compromise any claim, demand, suit, or judgment, upon said bond unless the undersigned requests the Surety to litigate such claim or demand, or defend such suit, or to appeal from such judgement, and shall deposit with the Surety collateral satisfactory to it in kind and amount; **Fourth**, that the Surety shall have the absolute right to procure its release from future liability under said bond under any law for the release of sureties, and the Surety is hereby released and from any damages that may be sustained by the Indemnitor by reason of such release; **Fifth**, that a representative of the Surety will be permitted at any time to examine the assets covered by the bond; **Sixth**, that the above agreements shall bind me and my heirs, executors, administrators, successors and assigns, jointly and severally.

FIRM NAME

PRINT NAME & TITLE

Dated this _____ day of _____, _____

Witness: _____ Applicant: _____

THE APPLICANT HEREBY AGREES AS FOLLOWS:

- The Surety is authorized to conduct a credit investigation of the Applicant and listed affiliates and applicant will provide all requested financial statements and records.

SECTION IV — COMPLETE FOR CASES REQUIRING ADDITIONAL INDEMNITY AND ATTACH FINANCIAL STATEMENTS OF INDEMNITORS

In consideration of the Surety executing, or procuring the execution of, or refraining from presently exercising its right to cancel, the bond herein applied for, we jointly and severally in the foregoing agreement: and the undersigned, if a corporation, warrants that it is financially interested in the performance of the obligation which said bond applied for is given to secure, and asserts that it is fully empowered to obligate itself hereby.

Dated this _____ day of _____, _____

Witness: _____ Indemnitor: _____ (L.S.)

Witness: _____ Indemnitor: _____ (L.S.)

Witness: _____ PRINT NAME OF INDEMNITOR HERE: _____ Indemnitor: _____

Witness: _____ PRINT NAME OF INDEMNITOR HERE: _____ Indemnitor: _____

Must be acknowledged before Notary Public by Indemnitor(s) _____
PRINT NAME OF INDEMNITOR HERE: _____

State of _____

County of _____

On this _____ day of _____, _____ before me personally appeared _____ to me known to be the person(s) or member(s) of the partnership or officer(s) of the corporation that signed the foregoing instrument and acknowledged the execution of the same to me.

Notary Public

Witness

Witness

Notary

Sign

Sign

UHLE INSURANCE SERVICES

CA License # 0596009

P. O. Box 571195

Tarzana, CA 91357-1195

Bus: (866) 4EZ BONDS Bus: (818)345-5666 Fax: (818)345-1878

PAWNBROKER BONDS

www.pawnbrokerbonds.com

When you begin a new pawnshop, State law requires you to furnish proof of \$100,000 in liquid assets OR furnish a bond for \$100,000 for one year. This bond does not have to be renewed when the term expires. Also, you must **have a \$20,000 bond which must be renewed every two years when you renew your State pawnbroker license.** The bond(s) effective date must be the same as on your State License and run concurrently.

BOND APPLICATION

Your name on the bond as Applicant or Principal must be the same name as that on your State pawnbroker license. The effective date should be the same as the effective date of your State license also.

Signing Instructions. If you are a corporation, the majority stockholder (or President if no one person owns a majority) signs as Applicant and the Corporate Secretary signs for the corporation. Both then sign again (along with their spouses) as Individual Indemnitors. ALL SIGNATURES MUST BE NOTARIZED.

If you are a Sole Proprietor or Partner, sign as Applicant on behalf of the business, then sign again (with spouses) as Individual Indemnitors. ALL SIGNATURES MUST BE NOTARIZED

PERSONAL FINANCIAL STATEMENT – NOT REQUIRED FOR \$20,000 BOND

BUSINESS FINANCIAL STATEMENT – NOT REQUIRED FOR \$20,000 BOND

FOR THE \$100,000 BOND. Attach your most recent personal and business compilation financial statements, preferably prepared by your C.P.A.

PREMIUMS AND BOND TERM – PREMIUMS SUBJECT TO CHANGE DUE TO CREDIT

Minimum premium for the \$20,000 bond is \$250 for two years with good credit. Minimum premium for the \$100,000 bond is \$750, depending on surety's underwriting rules and your credit and financial history. Both bonds may have premiums higher than the minimums, based on your credit. Also there may be fees in addition to the premium for the \$100,000 bond. We will furnish a firm quote before you accept any bond.

Please make your check to **UHLE INSURANCE TRUST ACCOUNT** for the appropriate premium(s) and return with the properly signed, notarized and completed forms to the address above. **Please fax before mailing.** Your bond(s) will be executed promptly and sent to you to file with your LOCAL police authority.

We appreciate — and specialize — in your business! We also offer the best Pawnbroker's Insurance Package in California which includes all the coverage you want and need to protect your business.