

AGENCY:

UNIVERSAL SURETY COMPANY INLAND INSURANCE COMPANY



BOND #:

PO Box 80468 Lincoln, NE 68501

A	DDRESS:								
			PUBLIC OFFI	CAL BON	ND APPLICATION				
	Applicant's Name								
General	Street Address							Net worth of applicant	
	Social Security # Employer/Occupation						For How Long?		
	Have you ever declared bankruptcy? Yes \sum No \subseteq * had a civil judgment? Yes \sum No \subseteq * had a civil judgment? Yes \sum No \subseteq * No \subseteq If so, name of surety:								
Bond	Bond Runs To(Obligee) Bond Amount Is this a new by Renewal bond of Prior By						ond?		
	Office/Position Held Term of office to			Premium will be paid: Annually In advance for the term	Renewal bond of another surety?				
ı	Elected						nen? te of last audit?		
Position	Name and Address of Political Division County							State	
	Describe any losses	during the past eight y	years (attach explanation į	f necessary)					
				EEMENT	(READ CAREFULI	(\mathbf{Y})			
•	In the event that Uni		y or Inland Insurance Com		er referred to as "Surety") now or				

of the undersigned further covenants and agrees as follows:

- 1. Applicant will pay Surety or its agents premiums when due, including annual renewal premiums, until satisfactory evidence of termination of liability has been provided to the Surety.
- 2. Applicant shall perform all conditions of any bond(s) or undertaking(s) now or in the future executed by Surety or procured by Surety for Applicant. Applicant and the undersigned will furnish written legal proof that Applicant has fully complied with the terms of any and all such bond(s) and undertaking(s).
- 3. The undersigned will at all times indemnify Surety and save it harmless from and against any and all claims, demands, judgments, liabilities, loss, damage, or expense of every kind and nature, including court costs and attorney fees, which it shall sustain or incur in consequence of it having executed or procured any bond(s) or undertaking(s) for Applicant, including any future bond or undertaking. Upon Surety's demand, the undersigned, and each of them, will deposit sufficient funds as collateral with Surety to meet every such claim, demand, judgment, liability, loss, damage or expense before Surety shall be required to pay the same.
- 4. Surety shall have the sole and exclusive right to decline to become surety or to withdraw as surety upon any bond(s) or undertaking(s) whenever it sees fit so to do. Surety shall not be required to disclose its reasons for doing so, and Surety shall have no liability to Applicant or any of the undersigned for any loss or damage resulting from said act.
- 5. Surety shall have the sole right to settle, compromise, adjust or pay any claim, demand or judgment made or rendered against it, by reason of its obligation of suretyship.
- 6. The obligations provided for herein shall continue in full force and effect until terminated in writing by each indemnitor and provided to Surety; such termination, if any, shall be prospective only, and shall have no effect on any bond(s) or undertaking(s) executed prior to the Surety's receipt of said termination.
- 7. Surety shall have the right to procure a credit investigation which may include but not be limited to information as to the character, general reputation, personal characteristics and mode of living of any or all of the undersigned and Applicant. This right shall continue so long as Surety continues to provide bonds and/or bonding capacity pursuant hereto, and so long as this agreement is in effect.
- 8. If this agreement is signed by two or more persons, firms, partnerships or corporations, then all obligations herein assumed shall be joint and several. If any undersigned is a married person, he or she hereby binds any joint and separate estate to the performance hereof. Each of the undersigned agrees that all of the terms of this agreement shall extend to and stand for the protection of Surety, any other surety and/or co-surety procured by it, or any reinsuring person or corporation.

Signea unis	day of	, 20	
			Ву:
			By:

Witness Signatures (all signatures should be witnessed)

Applicant/Indemnitor Signatures

Public Official - UA 550 2/07