American Surety Bonds Agency, LLC 1935 Cliff Valley Way, N.E. Suite 115, Atlanta, Georgia 30329 (404) 486-2355 Main (404) 393-0826 Fax

Applying for a bond is like applying for credit, therefore, please make sure this information is complete and legible.

Please submit all pertinent court documents to assist in our prompt underwriting

Applicant Information

• •										
Name of Applicant			Ag	ge	Pho	ne	Email			
□ Own □ Rent	Street Add	dress				City		<u> </u>	State	Zip
How long at this address?			SSN			Driver's Lic. No.		State		
Marital Status	Marital Status Spouse Name					Your Net Worth \$				
Education Level HIGH SCHOOL (9-12) COLLEGE (1-6)					Your relationship to the Ward or Decedent					
Present Employer			Address					Phone		
Present Occupation How Ion			g employed? If retired, give former occupation and				cupation and h	how long employed		
1.	declared bankruptcy?		☐ YE	s 🗆	☐ NO 3. had a cr		minal conviction?		☐ YI	ES 🗆 NO
HAVE YOU EVER: 2.	2. lost a civil judgment?		☐ YE	s 🗆	NO	4. been bonded?			☐ YI	ES 🗆 NO
If the answer is YES to any of the above, please attach a full explanation.										

Estate Information

			T				
Case No.	Hearing I	Date	Bond Amount \$				
Bond to be filed in The	Court of		County, the State of				
Appointment is: Tempora	ry Permanent	☐ Successo	☐ Successor ☐ Additional or Co-				
Date of Appointment If over 6 months ago. Explain reason for delay							
	☐ Minor	Date of Birth					
	☐ Incompetent	Date Declared Incompetent					
	Name of Minor/Incompetent (Ward)						
☐ GUARDIAN	Current health status of	the ward	Where does the ward reside?				
☐ CONSERVATOR							
- CONSERVATOR	What is the source of the ward's funds?						
	Will any assets be under	er Are guardian funds to be used for the support of the					
	court restriction?	ward	i? □ YES □ NO				
	☐ YES ☐ NO	If yes, provide copies of monthly expenditures and income					
☐ EXECUTOR	Name of Decedent						
☐ ADMINISTRATOR	Date of Death						
☐ SPECIAL ADMINISTRATOR	Was there a Will? ☐ YES ☐ NO If so, date of Will						
☐ ADMINISTRATOR WITH	List of names of heirs or beneficiaries of Decedent:						
WILL ANNEXED							
☐ PERSONAL							
REPRESENTATIVE							

Estate Assets

•	\$ Atc.)		\$	\$	Ι Φ	J	
Annual Income (interest, rents, SSI,	etc.) A		Ψ	ĮΨ	Φ	\$	
		pplican	pplicant's share In the Estate Bank where funds will b			e deposited	
\$ \$							
Bank Address			City			Zip	
How will securities be safeguarded	(Safe deposit, Broker, et	c.)					
Attorney of Record		Law	firm	Attorney Phone			
Address				State	Zip		
Will the attorney remain involved throughout the duration of this estate?						□ №	
Will professional accounting, investment or legal services be provided on an ongoing basis?						□ №	
If the answer is YES to any of the following questions, please attach a full explanation.							
Is bond required on the demand of an interested party?							
Are there any disputes among the heirs?						□ NO	
Does this bond replace that of another bonding company?					☐ YES		
Does Applicant replace a prior Fiduciary?					☐ YES	□ NO	
Does estate contain a going business?					☐ YES	□ NO	
Is Applicant indebted to the estate?						□ NO	
Do you understand that the bond is active and premium is due each year until a Final Discharge is approved at Court and a conformed copy is furnished to the surety?						□ NO	
Do you understand that the first year's premium is fully earned and not refundable?					☐ YES	□ NO	
Do you understand that increases or reductions in bond amount must be court approved?					☐ YES		
Do you understand that the premium is to be paid promptly when due until the bond is released?				☐ YES			
Agency Contact							
Agency Contact							

Agency		
Contact		
Address		
Phone	Fax	
Mobile	Email	

Indemnification Agreement - Read Carefully and Sign

IN CONSIDERATION of the execution of the bond for which application is made, the undersigned (collectively, "Applicant") for themselves, their personal representatives, heirs, successors and assigns, hereby agree with, warrant and represent to, and bind themselves jointly and severally to, \dot{U} ' \dot{C} and its co-sureties, re-insurers, and any other company which may execute a bond or bonds at the request of \dot{U} ' \dot{C} (individually and collectively called **Gi fYm**as follows:

- 1. Applicant agrees to pay \dot{U} '\^c an advanced premium for the first year or a fractional part thereof that is earned and the amount due annually thereafter in accordance with \dot{U} '\^c then current premium rates or any minimum earned premium until \dot{U} '\^c shall be discharged or released from any and all liability and responsibility under said bond, and all matters arising therefrom, and until competent written legal evidence of such discharge or release, satisfactory to \dot{U} '\^c, is furnished to \dot{U} '\^c
- Applicant agrees that U '\c^c may make any credit checks, including consumer and investigative credit checks, it deems necessary.
- 3. Applicant warrants and represents that the questions answered and information furnished in connection with the application are true and correct.
- 4. Applicant agrees to indemnify and keep indemnified Ù '\^c and its agents and representatives and hold and save it them harmless from and against any and all liability, damage, loss, cost and expense of whatsoever kind or nature, including consul and attorney's fee, which Ù \^c or its agents or representatives may at any time sustain or incur by reason or in consequence of have executed or procured the execution of the bond or enforcing this agreement against any of the undersigned or in procuring or in attempting to procure its release from liability under the bond.

- 5. If Ù' \^c shall set up a reserve to cover any liability, claims, suit or judgment under said bond, the undersigned will, immediately upon demand, deposit with Ù' \^c a sum of money, equal to such reserve and any increase thereof, to be held by Ù' \^c as collateral security on said bond. Any such collateral shall be available, in the discretion of Ù' \^c , as collateral security on any other or all bonds heretofore or hereafter executed for at the requests of any of the undersigned.
- 6. If Ù '\^c shall procure any other company or companies to execute or join with it in executing, or to reinsure said bonds, this instrument shall insure to the benefit of such other company or companies, its or their successors and assigns, so as to give it or them a direct right of actions against the indemnitors to enforce the provisions of this instrument.
- 7. An itemized statement of payments made by \dot{U} \^c, sworn to by an officer of \dot{U} \^c, shall be *prima facie* evidence of the liability of the undersigned to reimburse \dot{U} \^c for such payments with interests.
- 8. #\\div \^c in it sole discretion and without notice to the undersigned, is hereby authorized but not required from time to: (a) make or consent to any change in said bond or to issue any substitutes for any renewal thereof, and this instrument shall apply to such substituted or changed bond or renewal; (b) take such action as it may deem appropriate to prevent or minimize loss under said bond, including but not limited to steps to procure discharge from liability under said bonds, and (c) adjust, settle or compromise any claim or suit arising under said bond and, with respect to any such claims or suits, to take any action it may deem appropriate and any adjustment, settlement or compromise made or action taken by \(\tilde{U}^* \|^2 \circ \) shall be conclusive against and binding upon the undersigned.
- 9. Each of the undersigned agrees to pay the full amount of the foregoing regardless of (a) the failure of the principal or any applicant or indemnitor to sign any such bond or (b) any claims that other indemnity, security or collateral was to have been obtained or (c) the release, return or exchange by U' \^c Áwith 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.
- 10. The undersigned hereby expressly waive notice from \dot{U} '\c^c of any claims or demand made against \dot{U} '\c^c or the principal under the bond or of any information \dot{U} '\c^c may receive concerning the principal, any contract, or bond. \dot{U} '\c^c shall have to right to decline any or all bonds herein applied for and shall have the right to withdraw from or cancel the same at any time, all without incurring any liability to the undersigned.
- 11. 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. A facsimile of this Agreement shall be considered an original and shall be admissible in a court at law to the same extent as an original copy.
- 12. All obligations of the principal, applicants, and indemnitors to Ù´¦^ć are due, payable, and performable in where venue of any action to enforce this agreement may be brought by Ù´¦^ć. Ù´¦^ć shall be entitled to recover all attorney's fees (including those of attorneys employed by Ù´¦^ć), consulting fees, and claims adjustment expenses in defending any claims made against its bonds or in enforcing any of its rights under this Agreement.
- 13. In consideration of the execution by \dot{U} '\c^c of the suretyship herein applied for, each of the undersigned, jointly and severally, agree to be bound by all of the terms of the foregoing indemnity agreement executed by the applicant, as fully as though each of the undersigned were the sole applicant named herein, and admit to being financially interested in the performance of the obligation, which the suretyship applied for is given to secure.

Important Signature Instructions

- If sole owner, applicant must sign as duly authorized representative. Spouse must sign as additional indemnitor below.
- If a general partnership, an authorized partner must sign as duly authorized representative. All authorized partners and spouses must sign as additional indemnitor below.
- If a corporation the president must sign as the authorized representative. All stockholders of 10% or more and spouses must sign as additional indemnitor below.

Signed and dated this day of	, 20	
	•	
Print Applicant Name	XX	
	Additional Indemnitors	
Witness:	X(Signature)	(Print Name)

Probate - ASBA, LLC.