

				Additio	nal Ir	ndemr	nito	r Appli	icati	on Bo	ond Number:	
A				ВС	BOND INFORMATION							
COMPANY/APPLICANT'S NAME (NAME THAT WILL BE ON BOND)/ PRINCIPAL				RELATIO			ELATION	NSHIP TO PRINCIPAL	TODAY'S DA	TE		
B INDIVIDUAL'S	S EIDST N	IVME/ MIDDLI	E NAME/ LAST N		ITIONAL	INDEM		R INFORM		DATE OF BIRTH	SOCIAL SECU	DITV NI IMRED
INDIVIDUAL	3 FIRST I	NAIVIE/ IVIIDDLI	E INAIVIE/ LAST I	VAIVIE			DKI	VER 3 LIC INC	,	DATE OF BIRTH	SOCIAL SECU	KII I NUWDEK
EMPLOYER N	NAME				OC	CUPATION				LENGTH OF EMPLOYMENT	MONTHLY INC	OME
Married		Divorced	SPOUSE FIRST	NAME/ MIDDLE NAME/ LA	ST NAME		DRI	VER'S LIC NO)	DATE OF BIRTH	SOCIAL SECU	RITY NUMBER
Single		Separated										
SPOUSE EMP					OC	OCCUPTATION				LENGTH OF EMPLOYMENT	MONTHLY INC	OME
HOME ADDR	ESS/CITY	// STATE/ ZIP									HOME/ MOBIL	E PHONE
□ Own □ F		DATE PURCH	ASED	PURCHASE PRICE	E CURRE		NT MARKET VALUE			PRESENT LOAN BALANCE(S)	MONTHLY P	AYMENT(S)
		OWNED ADD	DECOLOTY O	TATE / 71D								
OTHER REAL	ESTATE	OWNED ADI	DRESS/ CITY/ ST	TATE/ ZIP								
DATE PURCH	14SED		PURCHAS	SE PRICE	CLIBBE	ENT MARKE	Τ \/ΔΙ	HE	DRES	ENT LOAN BALANCE(S)	MONTHLY PAY	/MENT(S)
DATETORO	IAOLD		TOROTIA	JE I NIOL	OOKK		-1 VAL	OL	INLO	LIVI LOAN BALANOL(O)	MONTHETTA	TWEITT(O)
NAME OF BA	NK				SAVIN	SAVINGS ACCOUNT BALANCE			CHECKING ACCOUNT BALANCE		PERSONAL NE	T WORTH
NEAREST RE	LATIVE I	NAME		RELATIONSHIP	ADDRE	ADDRESS					PHONE NUMB	ER
Have you, y				•				Are you a	guarar	ntor for a third party liability?		Yes No
	n any bus d bankrı	siness ventu intcv?	re?		l	Yes T				een convicted of a felony? assets in Trust(s)?		Yes No
been a	principa	or indemnit		vhich a claim was brough	nt?	Yes 🗀	No	If you ans	wered Yl	ES to any of the questions above,	please attach	
subject	to a fed	eral or state	tax lien?	INDEMNITY AGREE	MENT -	Yes DEAD C	No	a detailed				
In conside	eration	of America	n Contractors							alty Insurance Company a	nd/or United S	States Surety
Company	referre	d to hereaf	ter as "Surety	y," issuing the bond a	pplied for	, the unde	ersigr	ied hereby	agree	for themselves, their heirs	s, successors	and assigns,
jointly and			ial promium	advance in each vec	. 4	طمنا طمنطي	.:::4	undar tha h	ام امم	all continue in force and	until antinfant	om a svidonoo
				ty is furnished to the S		WIIICII IIau	mity C	inder the t	oriu si	nall continue in force and	urilii SaliSiaCi	ory evidence
						s, attorne	eys' f	ees and e	xpense	es the Surety may incur	or has incurre	ed due to the
					his date ii	ncluding	any n	nodification	ns, ren	ewals or extensions of the	e bond or the	enforcement
			emnity agree		yamine th	ne credit	histor	v emplovi	ment h	istory, books and records	s of the under	sianed or the
				assets pledged as co				y, citipioyi	illollt i	iistory, books and records	or the under	signed of the
4. The	undersi	igned waive	es notice of th	ne execution of the bo	nd, notice	e of any fa	act, kr		or infor	mation affecting the under	rsigned's right	ts or liabilities
unde	er the b	ond that Su	rety may ha	ve or discover prior to	or after	execution	n of th	ne bond.		D		
5. The	unaers Surety	ignea, upoi in its absol	ı written derr ute discretior	iand, snaii deposit wit n. determines necess	in Surety arv and t	a sum or he denos	mone it sha	ey request	ed by a red as	Surety to cover any claim, collateral security on any	suit, expense such bond o	or juagment
										nts Surety as their attorr		
										Surety shall have the exc		
										ement of payments made heir responsibility to defer		
										mise to pay Surety, shall		
Calif	ornia a	nd venue f	or any suit, a	rbitration, mediation of	or any oth	ner form o	of disp	oute resolu	ıtion sl	nall be in Los Angeles Co	unty, Californi	a.
		,							,	ancel bond by mailing a n		
			e and Princip I States Post		s provided	d to Sure	ty and	d cancellat	ion sn	all become effective thirty	(30) days are	er the date of
					e that: (1)) they are	sole	y respons	ible to	procure and maintain any	required lice	nse or permit
										r brokers owe no duty wi		
										and/or brokers from and a or permit lapse, suspens		
	•			new, continue or repla	•	•	necny	/ IIOIII aliy	IICELIS	or permit apse, suspens	sion of termina	monresumg
Regardles	ss of the	e date of si	gnature, this	indemnity is effective	as of the	e date of				I of the aforementioned b	ond(s) and is	continuous
	•	•		, ,	to the teri	ms and c	onditi	ons contai	ined he	erein and in the bond(s).		
instruction	ns: This	ıs a binding l	egai document -	- Read it carefully.		Da	ited:					
Indemnitors	:											
X							X					
	nitor's Sig	nature		Print Na	ame		5	Spouse Indem	nitor's S	ignature	Prin	t Name



NOTARY ACKNOWLEDGEMENT

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document

STATE O	F	§ §	
COUNTY	OF	_ § _ §	
On	before me,		personally appeared
his/her/the			, who proved to me on the basis of satisfactory t and acknowledged to me that he/she/they executed the same in nent the person(s), or the entity upon behalf of which the person(s)
I certify ur	nder PENALTY OF PERJURY under the law	s of the State of	that the foregoing paragraph is true and correct.
WITNESS	S my hand and official seal.		
Signature		(Seal)	
STATE O	to which this certificate is attached	d, and not the truthfulness, ac	nly the identity of the individual who signed the document curacy, or validity of that document
	F	§	
	OF	_	
On	before me,		personally appeared
his/her/the			who proved to me on the basis of satisfactory tand acknowledged to me that he/she/they executed the same in ment the person(s), or the entity upon behalf of which the person(s)
I certify ur	nder PENALTY OF PERJURY under the law	s of the State of	that the foregoing paragraph is true and correct.
WITNESS	S my hand and official seal.		
Signature		(Seal)	



Fraud Warnings and Privacy Notice

Fraud Warnings

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

APPLICABLE IN ALABAMA

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines or confinement in prison, or any combination thereof.

APPLICABLE IN ARKANSAS, LOUISIANA AND WEST VIRGINIA

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

APPLICABLE IN CALIFORNIA

For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

APPLICABLE IN COLORADO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement of award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

APPLICABLE IN THE DISTRICT OF COLUMBIA

WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.

APPLICABLE IN FLORIDA

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

APPLICABLE IN HAWAII

For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

APPLICABLE IN KANSAS

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

APPLICABLE IN KENTUCKY

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

APPLICABLE IN MAINE

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or denial of insurance benefits.



Fraud Warnings and Privacy Notice

APPLICABLE IN MARYLAND

Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

APPLICABLE IN MINNESOTA

Any person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

APPLICABLE IN NEW JERSEY

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

APPLICABLE IN OHIO

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deception statement is guilty of insurance fraud.

APPLICABLE IN OKLAHOMA

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

APPLICABLE IN OREGON

Material misstatements, misrepresentations, omissions or concealments by an insured that are fraudulent or material to the insurance contract, the risk assumed, or the interests of an insurer and are relied upon by an insurer may result in policy rescission, cancellation, or denial of claim.

APPLICABLE IN TENNESSEE, VIRGINIA AND WASHINGTON

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines or denial of insurance benefits.

APPLICABLE IN VERMONT

Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

NOTICE TO NEW YORK APPLICANTS:

Any person who knowingly 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 a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

FACTS

WHAT DOES TOKIO MARINE HCC DO WITH YOUR PERSONAL INFORMATION?

Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information may include:

- Account and transaction information;
- Contact and demographic information;
- Financial information;
- Claims information: and
- Credit history.

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Tokio Marine HCC chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Tokio Marine HCC share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes—information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes—information about your creditworthiness	Yes	Yes
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	No	N/A

To limit our sharing

- Call (888) 688-0775 our menu will prompt you through your choice(s).
- Email us online: <u>privacypolicy@tmhcc.com</u>.

Please note:

When you are *no longer* our customer, we continue to share your information as described in this notice.

However, you can contact us at any time to limit our sharing.

Questions?

Call (888) 688-0775 or send us an email at privacypolicy@tmhcc.com.

Who we are					
Who is providing this notice?	Tokio Marine HCC is the trading name of HCC Insurance Holdings, Inc.				
What we do					
How does Tokio Marine HCC protect my personal information?	To protect your personal information from unauthorized access and use, we maintain reasonable administrative, technical and physical safeguards designed to protect your personal information against accidental, unlawful or unauthorized destruction, loss, alteration, access, disclosure or use.				
How does Tokio Marine HCC collect my personal information?	 We collect your personal information, for example, when you: Sign up for and use our services, including when you choose to provide us with your information online or offline; Interact with our website and mobile applications; Obtain an insurance product from us through a broker, where we may collect personal information from your broker in order to prepare your quote and/or your insurance policy; and/or Submit an insurance claim, so we can properly handle your claim. We may also collect your personal information from others, such as credit bureaus, affiliates, or other companies. 				
Why can't I limit all sharing?	 Federal law gives you the right to limit only: sharing for affiliates' everyday business purposes—information about your creditworthiness; affiliates from using your information to market to you; and sharing for nonaffiliates to market to you. State laws and individual companies may give you additional rights to limit sharing. 				
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account.				
Definitions					
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. Our affiliates include our family of companies, available at https://www.tokiomarinehd.com/en/company/about/group.html .				
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies.				
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. Our joint marketing partners include categories of companies such as insurance companies.				
Other important information					
For more information, please review our priva	acy policy, located at https://www.tmhcc.com/en-us/legal/privacy-policy .				