

# INTEGRITY SURETY

---

Everything you do, do with Integrity

## **SBA Guaranteed Bonds Performance, Payment and Bid Bonds**

The SBA guarantees most contract bid, performance, and payment bonds issued by surety companies that are acceptable to the U.S. Treasury (Circular 570). The firm's annual gross receipts, and those of related companies, can not exceed \$6,000,000 or an average of \$6,000,000 over the last three years. This \$6,000,000 limit qualifies the contractor as a small business. The contract must be \$2 million or less

Please provide the following items to enable us to underwrite and respond in a timely matter.

**1. Completed Contractors Questionnaire (signed/dated current within 12 months)**

**2. Business Plan**

**3. Resumes of principals and key employees**

**4. Personal History of all owners SBA Form 912**

Individuals that have company authority including all officers, directors, managers and spouses should also complete this form.

**5. Business Financial Statements (signed/dated)**

Last 3 fiscal year end financial statements of business entity, plus current interim financial statements. If this statement is more than six months old, we require a current interim statement. Note: All financial statements are to include both a balance sheet and a profit and loss statement.

**6. Personal Financial Statement of Owners SBA Form 413 (signed/dated)**

**7. Bank Verification & 3 Months Personal and Business Bank Statements**

**8. Work on Hand SBA Form 994f (signed/dated)**

**9. Copy of Construction Contract, Bond Forms, Bid Results (If Bid, Bid Specifications)**

**10. Application for Surety Bond SBA Form 994 (signed/dated)**

**11. Statements Required by Laws SBA Form 1261**

All principals, owners, guarantors, corporate officers and directors should sign this form.

If you have any questions regarding **SBA Contract Bonds**, please do not hesitate to call us. We look forward to working with you and your clients.

AGENT/BROKER \_\_\_\_\_ PHONE (     ) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ FAX (     ) \_\_\_\_\_  
 \_\_\_\_\_ HCCS Producer Code \_\_\_\_\_

**CONTRACTORS QUALIFICATION QUESTIONNAIRE  
 ORGANIZATION AND BACKGROUND**

Name _____	(   ) Individual
Address _____ Fed. I.D. # _____	(   ) Partnership
Phone _____ Fax _____	(   ) Corporation

Date business formed \_\_\_\_\_ Date Incorporated \_\_\_\_\_

If SUCCESSOR to prior business, Name of Predecessor \_\_\_\_\_

H

Has there been any recent changes in control of your company?    -- Yes    -- No

If so, describe \_\_\_\_\_

**Principal Officers of the Company**

NAME	POSITION	% OF OWNER-SHIP	AGE	DATE OF EMPLOY	SOCIAL SECURITY NO.	NAME OF SPOUSE

Please asterisk officers who are authorized to execute documents for the Company under the Corporate Seal. Have provisions been made for continuation of their duties in the event of their death or disability? \_\_\_\_\_ Attach details.

**List of Affiliated, Subsidiary or Related Companies in which this Firm or its Stockholders have an interest:**

NAME AND ADDRESS	STOCK OWNERSHIP	SCOPE OF OPERATIONS	ENDORSEMENT BY PRINCIPAL OR STOCKHOLDERS



List the six most important contracts completed in the last five years

Owner's Name	Address & Phone Number	Contract Amount	Time Required to Complete
1.)			
2.)			
3.)			
4.)			
5.)			
6.)			

Largest work-on-hand position of company, at any one time was \$ \_\_\_\_\_

During \_\_\_\_\_ and consisted of \_\_\_\_\_ contracts.

Give the names of five principal suppliers.

Name	Address	Phone #
		Fax#
1.)		
2.)		
3.)		
4.)		
5.)		

**Surety Information**

Present Surety \_\_\_\_\_ Present Rate \_\_\_\_\_

Address \_\_\_\_\_

With present surety \_\_\_\_\_ years.

Largest single contract previously bonded \_\_\_\_\_

Why change of surety? \_\_\_\_\_

Covenants provided to present surety

1. Personal indemnities:    Yes    No    If yes, list indemnitors \_\_\_\_\_

2. Additional Corporate indemnities:    Yes    No    If yes, list additional indemnitors \_\_\_\_\_

3. Is collateral provided:    Yes    No    If yes, explain \_\_\_\_\_

**FINANCIAL INFORMATION**

**Banking**

Name of Bank \_\_\_\_\_  
Address \_\_\_\_\_  
Manager \_\_\_\_\_  
With bank since \_\_\_\_\_  
Previous bank \_\_\_\_\_  
Address \_\_\_\_\_  
Term with previous bank \_\_\_\_\_

**Line of Credit**

Amount \_\_\_\_\_  
Amount in Use \_\_\_\_\_  
Secured by: Yes    No  
A. Accounts receivable  
B. Collateral  
C. Personal covenants  
D. Additional corp. covenants

**Accounting**

Name of Accounting firm \_\_\_\_\_  
Address \_\_\_\_\_  
How long has this firm acted as your auditor? \_\_\_\_\_ years.  
Date last audited Financial Statement was prepared \_\_\_\_\_, \_\_\_\_\_.  
Is statement prepared on an (A) audited or (B) unaudited basis? \_\_\_\_\_  
Completed Job? \_\_\_\_\_ % of Completion \_\_\_\_\_ Accrual? \_\_\_\_\_ Other \_\_\_\_\_

Have (or are) any of your accounts receivables or retentions been assigned, pledged, hypothecated, sold or discounted? Yes    No  
If so, describe \_\_\_\_\_

ATTACH PERSONAL FINANCIAL STATEMENTS OF INDEMNITORS CONCURRENT WITH FISCAL YEAR-END OF CONTRACTOR.

ATTACH LAST THREE (3), COMPLETE FISCAL YEAR-END FINANCIAL STATEMENTS (IF NOT FULL CPA AUDITS, ATTACH SCHEDULES OF ALL BALANCE SHEET ITEMS AS WELL AS UNCOMPLETED WORK-ON-HAND SCHEDULES)

The Undersigned hereby represents that the herein statements are true and authorizes any bank or other reference to verify the correctness of items in the above statement to the Surety. Surety is authorized to investigate, at any time, the Undersigned's credit, employment history, and department of motor vehicle records.

Name of Company \_\_\_\_\_

Dated this \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
IF CORPORATION SIGN AND SEAL HERE

\_\_\_\_\_  
WITNESS SIGNATURE OF APPLICANT IF NOT A CORPORATION



**United States of America**  
**SMALL BUSINESS ADMINISTRATION**  
**STATEMENT OF PERSONAL HISTORY**

**Please Read Carefully - Print or Type**

Each member of the small business or the development company requesting assistance must submit this form in TRIPLICATE for filing with the SBA application. This form must be filled out and submitted by:

1. By the proprietor, if a sole proprietorship.
2. By each partner, if a partnership.
3. By each officer, director, and additionally by each holder of 20% or more of the ownership stock, if a corporation, limited liability company, or a development company.

Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)	SBA District/Disaster Area Office	
	Amount Applied for (when applicable)	File No. (if known)
1. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary.  First _____ Middle _____ Last _____	2. Give the percentage of ownership or stocked owned or to be owned in the small business or the development company	Social Security No. _____
	3. Date of Birth (Month, day, and year)	
	4. Place of Birth: (City & State or Foreign Country)	
	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> YES <input type="checkbox"/> NO If non- U.S. citizen provide alien registration number: _____	

Name and Address of participating lender or surety co. (when applicable and known)	
6. Present residence address: From: To: Address:  Home Telephone No. (Include A/C): Business Telephone No. (Include A/C):	Most recent prior address (omit if over 10 years ago): From: To: Address:

**PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION.**

**IT IS IMPORTANT THAT THE NEXT THREE QUESTIONS BE ANSWERED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED.**

**IF YOU ANSWER "YES" TO 7, 8, OR 9, FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION.**

7. Are you presently under indictment, on parole or probation?  <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, indicate date parole or probation is to expire.)	
8. Have you ever been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on an attached sheet.)  <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation?  <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. I authorize the Small Business Administration Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, and the Small Business Investment Act.	

**CAUTION:** Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 by imprisonment of not more than five years and/or a fine of not more than \$10,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

Signature _____	Title _____	Date _____
-----------------	-------------	------------

<b>Agency Use Only</b> 11. <input type="checkbox"/> Fingerprints Waived _____ Date _____ Approving Authority _____ <input type="checkbox"/> Fingerprints Required _____ Date _____ Approving Authority _____ Date Sent to OIG _____	12. <input type="checkbox"/> Cleared for Processing _____ Date _____ Approving Authority _____ 13. <input type="checkbox"/> Request a Character Evaluation _____ Date _____ Approving Authority _____ (Required whenever 7, 8 or 9 are answered "yes" even if cleared for processing.)
--	--

**PLEASE NOTE:** The estimated burden for completing this form is 15 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W., Washington D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval 3245-0178. **PLEASE DO NOT SEND FORMS TO OMB.**



## **NOTICES REQUIRED BY LAW**

The following is a brief summary of the laws applicable to this solicitation of information.

### **Paperwork Reduction Act (44 U.S.C. Chapter 35)**

SBA is collecting the information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for SBA to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

### **Privacy Act (5 U.S.C. § 552a)**

Any person can request to see or get copies of any personal information that SBA has in his or her file, when that file is retrievable by individual identifiers, such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. In making loans pursuant to section 7(a)(6) the Small Business Act (the Act), 15 USC § 636 (a)(6), SBA is required to have reasonable assurance that the loan is of sound value and will be repaid or that it is in the best interest of the Government to grant the assistance requested. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC § 636(a)(1)(B). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC §§ 634(b)(11) and 687b(a). For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

When this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. See 56 Fed. Reg. 8020 (1991) for other published routine uses.



**PERSONAL FINANCIAL STATEMENT**

U.S. SMALL BUSINESS ADMINISTRATION

As of \_\_\_\_\_, \_\_\_\_\_

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Residence Address \_\_\_\_\_ Residence Phone \_\_\_\_\_

City, State, & Zip Code \_\_\_\_\_

Business Name of Applicant/Borrower \_\_\_\_\_

ASSETS		(Omit Cents)	LIABILITIES		(Omit Cents)
Cash on hand & in Banks .....	\$	_____	Accounts Payable .....	\$	_____
Savings Accounts .....	\$	_____	Notes Payable to Banks and Others .....	\$	_____
IRA or Other Retirement Account .....	\$	_____	(Describe in Section 2)		
Accounts & Notes Receivable .....	\$	_____	Installment Account (Auto) .....	\$	_____
Life Insurance-Cash Surrender Value Only .....	\$	_____	Mo. Payments \$ _____		
(Complete Section 8)			Installment Account (Other) .....	\$	_____
Stocks and Bonds .....	\$	_____	Mo. Payments \$ _____		
(Describe in Section 3)			Loan on Life Insurance .....	\$	_____
Real Estate .....	\$	_____	Mortgages on Real Estate .....	\$	_____
(Describe in Section 4)			(Describe in Section 4)		
Automobile-Present Value .....	\$	_____	Unpaid Taxes .....	\$	_____
Other Personal Property .....	\$	_____	(Describe in Section 6)		
(Describe in Section 5)			Other Liabilities .....	\$	_____
Other Assets .....	\$	_____	(Describe in Section 7)		
(Describe in Section 5)			Total Liabilities .....	\$	_____
<b>Total</b>	\$	_____	Net Worth .....	\$	_____
			<b>Total</b>	\$	_____

Section 1. Source of Income	Contingent Liabilities
Salary .....	As Endorser or Co-Maker .....
Net Investment Income .....	Legal Claims & Judgments .....
Real Estate Income .....	Provision for Federal Income Tax .....
Other Income (Describe below)* .....	Other Special Debt .....

Description of Other Income in Section 1.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).**

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and Other Assets.** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

**Section 6. Unpaid Taxes.** (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. **PLEASE DO NOT SEND FORMS TO OMB.**



**SMALL BUSINESS ADMINISTRATION  
SCHEDULE OF UNCOMPLETED WORK (ALL WORK-BONDED & UNBONDED-IF COST PLUS PLEASE INDICATE)**

NAME OF CONTRACTOR								DATE: AS OF	
DESCRIPTION OF JOB:	STARTING DATE	COMPLETION DATE	Bonded	Unbonded	CONTRACT PRICE (Including Approved Change Orders)	Contractors Est. Cost When Bid (Including Cost of Approved Change Orders)	Total Billed to Date Including Retainages (Explain Any Dispute Items)	TOTAL COST TO DATE	TOTAL REVISED ESTIMATED COST TO COMPLETE
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
TOTALS									
TOTAL UNCOMPLETED WORK:							SIGNATURE		
TOTAL UNCOMPLETED WORK BY SUBCONTRACTOR:							TITLE		
BONDED:							REMARKS		
UNBONDED:									

**PLEASE NOTE:** The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to; Chief, Administrative Information Branch, Room 5000, U.S. Small Business Administration, 409 3rd St., SW, Washington, DC 20416; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.



**U.S. SMALL BUSINESS ADMINISTRATION  
APPLICATION FOR SURETY BOND GUARANTEE ASSISTANCE**

**OMB No:3245-0007  
EXP. DATE: 3-31-2007**  
See Reverse Side for  
Public Comment Information

TO BE COMPLETED BY PRINCIPAL	TO BE COMPLETED BY BROKER / AGENT (Producer)
TRADE NAME OF PRINCIPAL	NAME OF SURETY
PRINCIPAL'S HOME ADDRESS: STREET, CITY, STATE & ZIP	NAME OF BROKER / AGENT (Producer)
PRINCIPAL'S BUSINESS ADDRESS: STREET, CITY, STATE, ZIP & COUNTY	BROKER / AGENT (Producer's) ADDRESS: Street, City, State, Zip and County
	BROKER / AGENT (Producer's) TELEPHONE NUMBER (Include Area Code)
PRINCIPAL'S EMPLOYER ID NUMBER	BROKER / AGENT (Producer's) EMPLOYER ID NUMBER

1. Applicant hereby states and affirms the following:
- The annual gross receipts of my business (including affiliates, as set forth in Part 121 of SBA's Rules and Regulations) as annually averaged over the past 3 fiscal years, was \$\_\_\_\_\_ (to the nearest hundreds). If there are affiliates, attach an explanation sheet, delineating annual gross receipts of each as their interests appear. If there are stockholders, attach an explanation sheet specifying what their shares of the organization(s) are.  
 Type of business: Proprietorship, Partnership, Corporation, Type of Corp \_\_\_\_\_, Joint Venture  
 Month, Date and Year Business Formed: Venture Number of Employees \_\_\_\_\_
  - A bid, payment or performance bond is required on the following project in order for me to serve as a primary contractor or subcontractor thereon
  - Contractor certifies having attempted (and failed) to obtain the required bonds without the SBA's guarantee: furthermore, the contractor certifies being aware that some sureties charge higher premiums rates for bonds than other do, in accordance with premium rate schedules filed in various States.
  - (1) Brief description of this contract work:  
 (2) Contract Amount: \_\_\_\_\_ Contract have liquidated damages? Yes No  
 If "yes", how much? \$\_\_\_\_\_ per calendar or wkg. day.  
 (3) Anticipated project start date: mo.\_\_\_\_ day \_\_\_\_ yr.\_\_\_\_ (4) Projected completion date: mo.\_\_\_\_ day \_\_\_\_ yr.\_\_\_\_  
 (5) Project Location: \_\_\_\_\_ (6) Name of obligee or Prime Contractor: \_\_\_\_\_
  - Subcontractor involved in this job? Yes No  
 If yes, Contractor certifies that Subcontractor participation in work under contract is \_\_\_\_\_ %.
  - Applicant, in consideration of assistance from the SBA, herewith agrees it will comply with the nondiscrimination requirements of Title 13, Code of Federal Regulations, Part 113 and Executive Order 11246.
  - SBA is authorized to request this information under Executive Order 11625. It will be used only for statistical purposes. You are not required to disclose t his information. Failure to do so will not affect your application.  
 (1) Principal is a Veteran Veteran-ERA Veteran or Non Veteran (Check one)  
 (2) Principal is a Male Female  
 (3) Principal is a (0) Black, (1) Puerto Rican, (2) American Indian, (3) Hispanic (other than Puerto Rican) Includes Mexican-American, Cuban, Central or South American or others of Spanish Descent, (4) Asian (Includes original peoples of the Far East, Southeast Asia, the India Subcontinent or Pacific Islands.), (5) Eskimos and Aleuts, (6) Undetermined, (7) White, (8) Multi Groups

2. The Date, time and place of the bid opening is as follows: (if applicable)  
 Date \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

3. I have read the "Contractor's Fee" section (reverse side) and agree to abide by this fee schedule. PROVIDED I receive the contract sought and SBA extends its bond guarantee.

4. I do not have an SBA Loan. I had a previous SBA Loan. I do have an SBA Loan through the SBA Office in \_\_\_\_\_  
 \_\_\_\_\_ with a balance of \$ \_\_\_\_\_ as of (Date) \_\_\_\_\_ Loan No. \_\_\_\_\_

5. I am am not an SBA 8(a) Qualified Contractor I am am not an SBA Certified HUBZone Contractor This bond application does does not pertain to an 8(a) contract	7. I have have not received previous SBA bond guarantee, either under this trade name or another If under another trade name, specify: Trade Name: _____ City/State: _____ When? _____ to _____
6. I do or do not request Business Development Assistance I have or do not previously received SBA Business Development Assistance.	

8. Have you ever defaulted on any previous surety bonds (SBA or other) (either under this contracting concern's trade name or any other concern's of which you have been a principal? Yes No

If "yes", detailed particulars are to be attached to all four (4) copies of this application form. Particulars should include at least the following: (1) Name of Surety; (2) Name of obligee; (3) SBG No. with suffix Number, if applicable; (4) Value of Contracts; (5) Date of Default; (6) Status of Default claim, i.e., amount of loss to Surety, etc.; (7) Contractor's narrative explanation as to reason for default and actions taken to meet the obligations to the Surety under term of the bond(s).

9. Have you made, or are you planning to make, any payments, except for premiums, to the Surety or Agent for whatever purpose as a condition of, or in connection with, the issuance of the bond(s) to be guaranteed by SBA? Yes No. If "yes", detailed particulars are to be attached to all four (4) copies of this application form.

10. Applicant hereby authorizes any agent, broker, surety company or financial institution in possession of credit, financial or work experience information concerning the undersigned applicant and the applicant's business to release the same to SBA, in order that SBA may evaluate the same for the purpose of bond guarantee assistance. Applicant certifies that any information he submits to any agent, broker or surety company for their evaluation as to the bondability of this contractor is correct and accurate to the best of the contractor's knowledge.

11. Any intentionally false statement in this application or willful misrepresentation relative thereto is a violation of federal law, which may subject you to criminal and civil prosecution, 18 U.S.C. Sections 287, 371, 1001; 15 U.S.C. Section 645; 31 U.S.C. Section 231, carrying fines up to \$10,000 and imprisonment up to five years.

12. Certification: I hereby certify that all information presented herein is complete and accurate to the best of my knowledge and that the previously submitted "Statement of Personal History" (SBA Form 912) remains complete and accurate or a revised SBA Form 912 has been submitted.

13. Certification: I hereby certify that I am currently not delinquent on any Federal Debt or Federally Guaranteed Debt.

Principal's Signature (Applicant) \_\_\_\_\_ Date \_\_\_\_\_  
 Title: \_\_\_\_\_

TO BE COMPLETED BY SBA
DATE REC'D BY SBA _____
BY: (NAME) _____
SBG NO. _____



## **SURETY BOND GUARANTEE APPLICATION PROCEDURES**

1. Applicant contacts a surety, or its representative, which participates in SBA'S Surety Bond Guarantee Program. The nearest SBA Office can provide applicant with a list of these sureties.
2. Surety will provide applicant with:
  - a. SBA Form 912 (Statement of Personal History)
  - b. SBA Form 994 (Application for Surety Bond Guarantee Assistance)
  - c. SBA Form 994F (Schedule of Uncompleted Work)
  - d. Documents relating to credit information and business history which are standard to the surety industry.

Applicant completes these documents and returns them to the surety.

3. If the application is for final (performance and/or payment ) bonds, it must be accompanied by the Contractor Fee check payable to SBA (or U. S. Small Business Administration).
4. Upon completion of favorable underwriting, surety forwards all required documents, to the appropriate SBA area office.
5. The SBA Surety Bond Guarantee staff reviews the application, makes final determination, and notifies surety of its decision. SBA returns the countersigned Guarantee Agreement to the surety. If SBA declines to issue the guarantee, the check for the Contractor Fee is also returned to the surety.
6. If any adverse information develops subsequent to SBA's approval of the bond guarantee, surety may decline to issue the bonds.

**PLEASE NOTE:** The estimated burden for completing this form is 10 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W., Washington, D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval (3245-007). **PLEASE DO NOT SEND FORMS TO OMB.**

## Statements Required by Laws and Executive Orders

Federal executive agencies, including the Small Business Administration (SBA), are required to withhold or limit financial assistance, to impose special conditions on approved loans, to provide special notices to applicants or borrowers and to require special reports and data from borrowers in order to comply with legislation passed by the Congress and Executive Orders issued by the President and by the provisions of various inter-agency agreements. SBA has issued regulations and procedures that implement these laws and executive orders, and they are contained in Parts 112, 113, 116, and 117, Title 13, Code of Federal Regulations Chapter 1, or Standard Operating Procedures.

This form contains a brief summary of the various laws and executive orders that affect SBA's business loan programs and gives applicants and borrowers the notices required by law or otherwise. The signatures required on the last page provide evidence that SBA has given the necessary notices.

### Freedom of Information Act

(5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information reflected in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics) and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms and the maturity. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

### Right to Financial Privacy Act of 1978

(12 U.S.C. 3401)

This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guarantee. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government loan or loan guaranty agreement. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan or loan guaranty agreement. No further notice to you of SBA's access rights is required during the term of any such agreement.

The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan, or concerning an approved loan or loan guarantee, as necessary to process, service or foreclose on a loan or loan guarantee or to collect on a defaulted loan or loan guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

## **Flood Disaster Protection Act**

(42 U.S.C. 4011)

Regulations have been issued by the Federal Insurance Administration (FIA) and by SBA implementing this Act and its amendments. These regulations prohibit SBA from making certain loans in an FIA designated floodplain unless Federal flood insurance is purchased as a condition of the loan. Failure to maintain the required level of flood insurance makes the applicant ineligible for any future financial assistance from SBA under any program, including disaster assistance.

## **Executive Orders -- Floodplain Management and Wetland Protection**

(42 F.R. 26951 and 42 F.R. 26961)

The SBA discourages any settlement in or development of a floodplain or a wetland. This statement is to notify all SBA loan applicants that such actions are hazardous to both life and property and should be avoided. The additional cost of flood preventive construction must be considered in addition to the possible loss of all assets and investments in future floods.

## **Lead-Based Paint Poisoning Prevention Act**

(42 U.S.C. 4821 et seq.)

Borrowers using SBA funds for the construction or rehabilitation of a residential structure are prohibited from using lead-based paint (as defined in SBA regulations) on all interior surfaces, whether accessible or not, and exterior surfaces, such as stairs, decks, porches, railings, windows and doors, which are readily accessible to children under 7 years of age. A "residential structure" is any home, apartment, hotel, motel, orphanage, boarding school, dormitory, day care center, extended care facility, college or other school housing, hospital, group practice or community facility and all other residential or institutional structures where persons reside.

## **Equal Credit Opportunity Act**

(15 U.S.C. 1691)

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

## **Civil Rights Legislation**

All businesses receiving SBA financial assistance must agree not to discriminate in any business practice, including employment practices and services to the public, on the basis of categories cited in 13 C.F.R., Parts 112, 113 and 117 of SBA Regulations. This includes making their goods and services available to handicapped clients or customers. All business borrowers will be required to display the "Equal Employment Opportunity Poster" prescribed by SBA.

## **Executive Order 11738 -- Environmental Protection**

(38 F.R. 25161)

The Executive Order charges SBA with administering its loan programs in a manner that will result in effective enforcement of the Clean Air Act, the Federal Water Pollution Act and other environmental protection legislation. SBA must, therefore, impose conditions on some loans. By acknowledging receipt of this form and presenting the application, the principals of all small businesses borrowing \$100,000 or more in direct funds stipulate to the following:

1. That any facility used, or to be used, by the subject firm is not cited on the EPA list of Violating Facilities.
2. That subject firm will comply with all the requirements of Section 114 of the Clean Air Act (42 U.S.C. 7414) and Section 308 of the Water Act (33 U.S.C. 1318) relating to inspection, monitoring, entry, reports and information, as well as all other requirements specified in Section 114 and Section 308 of the respective Acts, and all regulations and guidelines issued thereunder.
3. That subject firm will notify SBA of the receipt of any communication from the Director of the Environmental Protection Agency indicating that a facility utilized, or to be utilized, by subject firm is under consideration to be listed on the EPA List of Violating Facilities.

## **Occupational Safety and Health Act**

(15 U.S.C. 651 et seq.)

This legislation authorizes the Occupational Safety and Health Administration in the Department of Labor to require businesses to modify facilities and procedures to protect employees or pay penalty fees. In some instances the business can be forced to cease operations or be prevented from starting operations in a new facility. Therefore, in some instances SBA may require additional information from an applicant to determine whether the business will be in compliance with OSHA regulations and allowed to operate its facility after the loan is approved and disbursed.

Signing this form as borrower is a certification that the OSA requirements that apply to the borrower's business have been determined and the borrower to the best of its knowledge is in compliance.

## **Debt Collection Act of 1982 Deficit Reduction Act of 1984**

(31 U.S.C. 3701 et seq. and other titles)

These laws require SBA to aggressively collect any loan payments which become delinquent. SBA must obtain your taxpayer identification number when you apply for a loan. If you receive a loan, and do not make payments as they come due, SBA may take one or more of the following actions:

- Report the status of your loan(s) to credit bureaus
- Hire a collection agency to collect your loan
- Offset your income tax refund or other amounts due to you from the Federal Government
- Suspend or debar you or your company from doing business with the Federal Government
- Refer your loan to the Department of Justice or other attorneys for litigation
- Foreclose on collateral or take other action permitted in the loan instruments.

# Immigration Reform and Control Act of 1986

(Pub. L. 99-603)

If you are an alien who was in this country illegally since before January 1, 1982, you may have been granted lawful temporary resident status by the United States Immigration and Naturalization Service pursuant to the Immigration Reform and Control Act of 1986 (Pub. L 99-603). For five years from the date you are granted such status, you are not eligible for financial assistance from the SBA in the form of a loan or guaranty under section 7(a) of the Small Business Act unless you are disabled or a Cuban or Haitian entrant. When you sign this document, you are making the certification that the Immigration Reform and Control Act of 1986 does not apply to you, or if it does apply, more than five years have elapsed since you have been granted lawful temporary resident status pursuant to such 1986 legislation.

## Applicant's Acknowledgement

My signature acknowledges receipt of this form, that I have read it and that I have a copy for my files. My signature represents my agreement to comply with the requirements the Small Business Administration makes in connection with the approval of my loan request and to comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights or other limitations in this notice.

Business Name \_\_\_\_\_

\_\_\_\_\_ By \_\_\_\_\_  
Date Signature and Title

The Proprietor, each General Partner (or Limited Partner owning 20% or more), each Guarantor, each Corporate Officer, each Director, each Stockholder owning 20% or more, and where appropriate, the spouses of each of these, must sign. The person signing on behalf of the business must also sign individually.

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Date Signature