

SUBDIVISION BONDS

Performance Bonding Surety & Insurance Brokerage, L.P.
15901 Red Hill Avenue, Suite 100
Tustin, California 92780

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www.performancebonding.com

Items Required

- 1) Completed Subdivider's Questionnaire.
- 2) Completed Subdivider's Bond Information Sheet
- 3) Last Fiscal Year End Financial Statements, including Profit & Loss Statements as prepared by an outside accountant or CPA. Please provide current Interim Financial Statement, if available.
- 4) Personal Financial Statements on all Owners, Major Stockholders, Partners, and/or Indemnitors
- 5) Copy of Entity Documents, i.e., Articles of Incorporation, Partnership Agreement, Joint Venture
- 6) Provide Resumes of Key Personnel including Owners/Principals and/or Company Brochure
- 7) Please provide subdivision Improvement Agreement(s) & City or County Engineer's Estimate
- 8) Please provide the Required bond forms

Thank you,

Performance Bonding Surety & Insurance Services, L.P.

Equal Opportunity Bonding

The underwriting of this Company will not be based on any of the following considerations:
Race, Sex, Color, Religion, Marital Status, National Origin or Ancestry.



PASSIONATE ADVOCATES
for peace of mind.



SUBDIVIDER'S QUESTIONNAIRE

1) Name of Company _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____ Federal Tax ID. # _____
 E-Mail _____ Website _____

Type of Organization (check one) Corp. S-Corp. Partnership Proprietorship LLC.

2) Principals of the Company:

NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ()
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ()
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (AS IT SHOULD APPEAR ON INDEMNITY AGREEMENT)					POSITION OR TITLE		% OF OWNERSHIP
RESIDENCE ADDRESS		CITY	STATE	ZIP		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	HOME PHONE ()
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	HOW LONG IN INDUSTRY		HOW LONG WITH FIRM
PERSONAL BANK		ADDRESS			ACCOUNT NUMBERS		
SPOUSE'S NAME		SPOUSE'S DRIVER'S LICENSE NO.		SPOUSE'S SOCIAL SECURITY NO.		YEAR BORN	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No

Do any of the Indemnitors participate and/or have any assets in a Trust of any kind? Yes No *If Yes, please attach a copy of the Trust.*

4) Year business started _____ Contractor's License Number _____ State _____

5) Include prior and/or current projects *if extensive, please attach a separate sheet*



	Name and Location of Tract	Year Started	No. of Lots	Amt. of Improvements	Bond Company	Date or % Completed
A.				\$		
B.				\$		
C.				\$		

	Name of Lender (For Tracts Listed Above)	Loan Officer	Phone No.
A.			
B.			
C.			

6)	Name of Accountant	Fiscal Yr. End	Phone No.

	Name of Bank and Address	Account#	No. of Years with Bank.
A.			
B.			

	Name of Banker	Phone No.	Line of Credit Amount?
A.			\$
B.			\$

- 7) Have you, your partner(s), your company or any officer in your company:
- A. Failed to complete a project..... Yes No
 - B. Failed in a business..... Yes No
 - C. Filed personal or business bankruptcy..... Yes No
- 8) Has any Surety ever declined to furnish you or your company a Bond?..... Yes No
- 9) Have you had any Surety Bond Claims?..... Yes No
- 10) Have you had any Lawsuits or Judgments within the last two years?..... Yes No

If answered Yes to any part of questions 7, 8, 9 or 10, please attach explanation.

- 11) Have any Liens been filed against projects you have been involved with developing during the past two years?
 Yes No. *If Yes, please complete.*

Date	Amount	By Whom	Date Released	Reasons & Details
	\$			
	\$			
	\$			

I/WE HEREBY AUTHORIZE A SURETY COMPANY TO CONTACT CREDIT SOURCES TO VERIFY CREDIT INFORMATION FOR THE COMPANY AND/OR OWNER'S OF SAID COMPANY.

X _____ / _____ / _____
Signature Print Name Date



SUBDIVISION BOND INFORMATION SHEET

Developer: _____
 Subdivision Name: _____ Type of Product: _____
 Describe Location: _____

Tract Number: _____ Number of Units: _____
 Selling Price of Units: \$ _____ To \$ _____
 Square Feet of Units: _____ To _____

Construction Lender: _____ Loan Officer: _____

Address: _____ Phone: () _____

Amount of Construction Loan: \$ _____
 Amount Allocated for Off-Site Improvements: \$ _____
 Is a Set-Aside Letter Available Yes No

Cost of Land: \$ _____
 When Purchased: _____
 How Much Owed: _____

Name of General Contractor: _____

Improvements	Cost	Name of Subcontractor (If applicable)
Excav., Grading, Clearing	\$ _____	_____
Engineering	\$ _____	_____
Streets, Curbs, Gutters	\$ _____	_____
Water	\$ _____	_____
Sewers	\$ _____	_____
Utilities	\$ _____	_____
Other	\$ _____	_____

Obligee (Municipality Requiring Bonds): _____
 Address of Obligee: _____ Phone: _____

Type of Bond	Performance	Labor & Materials
Grading Improvements	\$ _____	\$ _____
Street Improvements	\$ _____	\$ _____
Water Improvements	\$ _____	\$ _____
Storm Drain Improvements	\$ _____	\$ _____
Monument	\$ _____	\$ _____
Maint. Guarantee	\$ _____	\$ _____
Property Tax	\$ _____	\$ _____
Other	\$ _____	\$ _____

