

PO Box 29502 #69121, Las Vegas, NV 89126-9502 | (858) 618-1648 | Fax: (858) 618-1655 | [www.cresinsurance.com](http://www.cresinsurance.com)

**GENERAL INFORMATION** All sections on this application must be complete. Incomplete applications will cause delay in processing.

Bondholder Name (Exactly as is appears on license): \_\_\_\_\_ Phone#: \_\_\_\_\_

SS#: \_\_\_\_\_ NMLS# (If applicable): \_\_\_\_\_

Physical Address: \_\_\_\_\_

Name of Bond Type Required: \_\_\_\_\_

State(s) Where Bond is Required: \_\_\_\_\_ Bond Amount: \$ \_\_\_\_\_

Effective Date: \_\_\_\_\_ Years Lic'd: \_\_\_\_\_ Years in Business: \_\_\_\_\_

**SPOUSAL INFORMATION AS REQUIRED**

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ SS#: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (if applicable): \_\_\_\_\_

**UNDERWRITING QUESTIONNAIRE**

1. How long has the applicant been a Mortgage Broker or in an associated field? \_\_\_\_\_
2. Has the business, or any other owner/applicant:
  - YES  NO Ever been convicted of a felony crime?
  - YES  NO Ever had their license suspended, revoked or denied?
  - YES  NO Ever been party to a surety bond claim?
3.  YES  NO Does the applicant have any other surety bonds in force?  
If "yes", list type bond(s) & company(ies): \_\_\_\_\_
4.  YES  NO Has the applicant ever had a bond involuntarily terminated or cancelled?  
If "yes", explain: \_\_\_\_\_
5.  YES  NO Does the applicant or any companies owned by or related to the applicant have any pending lawsuits, unsatisfied judgements, or liens?  
If "yes", explain: \_\_\_\_\_
6.  YES  NO Has the applicant or any companies owned by or related to the applicant declared bankruptcy or become insolvent?  
If "yes", provide details and date of discharge for bankruptcy: \_\_\_\_\_
7.  YES  NO Has the applicant or any companies owned by or related to the applicant been the subject of a legal or administrative proceeding resulting in a disciplinary action?  
If "yes", explain: \_\_\_\_\_

**CREDIT REPORT CONSENT**

The undersigned applicant(s) and/or indemnitor(s) understand and agree that by submitting an application for bonding to any of the writing companies CRES, A Gallagher Company, works with, the undersigned authorize the verification of information provided and the obtaining individuals associated with the business involved, including spouses, at the time of the application, in any review or renewal, at the time of any potential or actual claim, or for any other legitimate purpose determined by the writing company in its reasonable discretion.

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

SIGNATURES OF ALL OWNERS APPLYING FOR THE INSURANCE IS REQUIRED:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**INSURANCE FRAUD PREVENTION ACT NOTICE**

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.