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William R. Hanley, Lic.# A110159

## DEFENDANT'S COURT BOND APPLICATION

**Please Note:** This application is for individual applicants or individual owners of a corporation. If applicant wishes to use a corporate indemnity only, prior approval is necessary. All information requested in this application must be complete for Applicant and Personal Indemnitors. Include full business names(s), full legal names of all owners, partners, or stockholders, Social Security numbers, complete street addresses with zip codes, and phone numbers with area codes.

### PLEASE TYPE OR PRINT LEGIBLY

Individual  Partnership  Corporation  Sub S Corp.  LLC State of incorporation \_\_\_\_\_, Yr. \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street, City, State & Zip Code)

Phone No. (\_\_\_\_\_) \_\_\_\_\_ Tax ID No. or Soc. Security No. \_\_\_\_\_

Applicant's Attorney: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street, City, State & Zip Code)

Phone No. (\_\_\_\_\_) \_\_\_\_\_ FAX No. (\_\_\_\_\_) \_\_\_\_\_

Name of Obligee (Opposing Party) \_\_\_\_\_

Obligee's Address \_\_\_\_\_  
(Street, City, State & Zip Code)

Type of Bond \_\_\_\_\_ Bond Amount \$ \_\_\_\_\_

Bond to be Filed in \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Case No. \_\_\_\_\_

### IMPORTANT - Information requested from attorney

FOR RELEASE OF ATTACHMENT, GARNISHMENT, LIEN, CLAIM AND DELIVERY, OR ANY FORTHCOMING BOND - State amount of plaintiff's claim and basis for same together with Applicant's defense thereto. Describe the property in controversy and its value. State briefly the facts showing the legal right and title of the Applicant in and to the property. What disposition will be made of the property during litigation.

FOR APPEAL, SUPERSEDEAS OR STAY BONDS - Attach a copy of the judgment. Give full particulars if judgment, decree or order is not for specific amount of money.

FOR ALL OTHER CASES - State fully and particularly all the facts of the case having any bearing upon the risk involved, attaching copy of other important papers or pleadings.

**FINANCIAL STATEMENT**

If applying on behalf of a corporation attach accountant's Financial Statement, including Balance Sheet and Profit & Loss Statement. If applying as an individual, complete below.

Statement of Applicant's Assets and Liabilities as of: \_\_\_\_\_

ASSETS		LIABILITIES	
Cash(incl.Savings)		Notes Payable	
Stocks & Bonds		Credit Card Balance	
Notes Rec.		All Taxes Payable	
Real Estate (Fair Market Value)		Mortgages Payable	
All Other Assets		All Other Liabilities	
		Total Liabilities	
Total Assets		Net Worth (Total Assets - Total	

**INDEMNITY AGREEMENT**

The undersigned, hereinafter called the Indemnitor(s) (if there be more than one Indemnitor they jointly and severally and for each other do) hereby undertake, represent, warrant and agree as follows:

That the foregoing statements made and answers given in the submitted application are the truth without reservation, and are made for the purpose of inducing the NGM INSURANCE COMPANY, hereinafter referred to as the Company, to execute or procure the execution of a certain bond or undertaking herein applied for. That this Agreement shall apply to the bond or undertaking herein applied for, and any and all extensions, increases, modifications or renewals thereof, or additions or substitutions therefore, any and all such instruments separately and collectively being hereinafter called the Bond. That the Indemnitor(s) shall pay all premiums and renewal premiums as may become due until the Company shall be discharged and released from any and all liability and responsibility under the Bond. That the Indemnitor(s) shall at all times indemnify, save the Company harmless from, and place the Company in funds to meet any claim, demand, loss, liability, costs, charge, attorney's fee, expense, suit order, judgment, or adjudication arising from the existence of the Bond. That if the Company shall set up a reserve to cover any claim, demand, loss, liability cost, charge, attorney's fee, expense, suit, order judgment or adjudication arising from the existence of the Bond the Indemnitor(s) shall, immediately upon demand, deposit with the Company a sum of money equal to such reserve, such sum to be held by the Company as collateral security for the Bond obligation. That the Company shall have exclusive right to determine for itself and the Indemnitor(s) whether any claim or suit brought against the Company or the Principal, as a result of the existence of the Bond, shall be settled or defended and its decision shall be binding and conclusive upon the Indemnitor(s). That this Agreement shall bind the heirs, executors, administrators, successors and assigns of the Indemnitor(s). That nothing herein contained shall be in derogation of any right remedy which the Company might have independently hereof.

"ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE."

Signed, Sealed and Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

IF APPLICANT is an **INDIVIDUAL**, sign here:

\_\_\_\_\_  
 \_\_\_\_\_  
 SSN: \_\_\_\_\_  
 SSN: \_\_\_\_\_

IF APPLICANT is a **CORPORATION** or a **PARTNERSHIP**, sign here:

\_\_\_\_\_ (Authorized person Corporate Officer or Managing Partner)  
 Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

IF **THIRD PARTY INDEMNITOR(S)**, sign here:

In consideration of Surety executing the bond hereinabove applied for, I join in the forgoing indemnity agreement.

\_\_\_\_\_  
 Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_  
 (Street, City, State & Zip Code)