

**PROPOSAL FORM
PERFORMANCE BOND**

Please Note

1. Please answer **ALL** questions in full. If there is insufficient spaces on the form please continue on the company letterhead.
2. The latest audited Financial Statements / Annual Report / Interim Report **MUST** be attached.
3. This form may be used for new applications or new renewals. In the case of renewals, the underwriters **MUST** receive a completed, signed and dated proposal form, financials/reports, and acceptance of renewal terms prior to renewal date, failing which, no cover exists after said date.
4. It is the intention of underwriters that any Contract of Insurance with the Proposer shall be based upon the information provided in this Proposal Form as well as any attachments included. If a quotation is offered, it will be the intention of the underwriters to offer cover **ONLY** in respect of the entities named under Particulars of Proposer.

NB: (No insurance is in force until the Proposal has been accepted by the Company and the premium paid, except as provided by an official Covering Note issued by the Company)

If SKYBRIDGE RE agrees to issue a performance bond, all of the information, which the company provides, will become part of and shall form the basis of any bond issued to the Company by Skybridge Reinsurance Brokers.

Contractor Name
(complete address including ZIP Code and legal title) _____

As Principal, hereinafter called Contractor, and
(Surety name and complete address) _____

A corporation organized and existing under the laws of the State of: _____
With its principal office in the City of: _____
As Surety, are held firmly bound unto (Owner name, complete address including ZIP Code and legal title) _____
As Obligee, hereinafter called Owner, in the amount of: _____

For the payment whereof Contractor and Surety bind themselves, their heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, Contractor has by written agreement dated _____

Entered into a contract with Owner for: _____

In accordance with drawings and specifications prepared by: _____

Which contract is by reference made a part hereof, and is hereinafter referred to as the **CONTRACT**.

Now, therefore, the condition of this obligation is such that if Contractor shall, promptly and faithfully Perform and CONTRACT, then this obligation shall be null and void, otherwise it shall remain in full force and effect. The Surety hereby waives notice of any alteration or extension of time made by the Owner.

Whenever Contractor shall be, and declared by Owner to be in default under the CONTRACT, the Owner having performed Owner's obligations thereunder, the Surety may promptly remedy the default, or shall promptly:

1. Complete the CONTRACT in accordance with its terms and conditions, and
2. Shall save the Owner harmless from any claims, judgments, or liens arising from the Surety's failure to either remedy the default or to complete the CONTRACT in accordance with its terms and conditions in a timely manner.

No right of action shall accrue on this bond to or for the use of any person or corporation other than the Owner named herein or the successors of Owner.

Signed and Sealed this* _____ Day of _____ 20 _____
Principal Corporate Seal

(Contractors Name) (Seal)

By: _____ (Seal)
(Must be President ,Vice President, Owner, Partner, Manager, Member, or other Duly Authorised Agent)

Surety Corporate Seal: _____ (Title)

(Surety)

NOTE: Please attach Power of Attorney. By: _____ (Seal)

*Power of Attorney must be certified on this date or later.

NOTE: Applicable sections of attached acknowledgments must be completed and returned as part of the bond.

ACKNOWLEDGMENTS

Acknowledgment by Principal if individual or Partnership

1. STATE OF _____
2. Country of _____ To-wit:
3. I, _____, a Notary Public in and for the
4. Country and state aforesaid, do hereby certify that _____
 Whose name is signed to the foregoing writing, has this day acknowledged the same before me in my said country.
5. Given under my hand this _____ day of _____ 20 _____
6. Notary Seal: _____

 (Notary Public)
8. My commission expires _____ day of _____ 20 _____
 on the: _____

Acknowledgement by Principal of Corporation

1. STATE OF _____
2. Country of _____ To-wit:
3. I, _____, a Notary Public in and for the
4. Country and state aforesaid, do hereby certify that _____
 Whose name is signed to the foregoing writing, has this day acknowledged the same before me in my said country.
5. Given under my hand this _____ day of _____ 20 _____
6. Notary Seal: _____

 (Notary Public)
8. My commission expires _____ day of _____ 20 _____
 on the: _____

Acknowledgment by Surety

1. STATE OF _____
2. Country of _____ To-wit:
3. I, _____, a Notary Public in and for the
4. Country and state aforesaid, do hereby certify that _____
 Whose name is signed to the foregoing writing, has this day acknowledged the same before me in my said country.
5. Given under my hand this _____ day of _____ 20 _____
6. Notary Seal: _____

 (Notary Public)
8. My commission expires _____ day of _____ 20 _____
 on the: _____

Sufficiency in Form and Manner**of Execution Approved****Attorney General**

This _____ day of _____ 20_____

by: _____

(Deputy Attorney General)

ACKNOWLEDGMENT PREPARATION INSTRUCTIONS

1. IF PRINCIPAL IS AN INDIVIDUAL OR PARTNERSHIP, HAVE NOTARY COMPLETE LINES (1) THROUGH (8).
2. IF PRINCIPAL IS A CORPORATION, HAVE NOTARY COMPLETE LINES (9) through (18).
3. SURETY MUST HAVE NOTARY COMPLETE LINES (19) through (28).
4. **Notaries must:**

ACKNOWLEDGMENT BY PRINCIPAL, IF INDIVIDUAL OR PARTNERSHIP

1. Enter name of State.
2. Enter name of Country.
3. Enter name of Notary Public witnessing transactions.
4. Enter name of principal covered by bond if individual or partnership. (Must be Owner or General Partner of Sole Proprietorship or Partnership)
5. Notary enters date bond was witnessed. Must be the same as or later than signature date.
6. Affix Notary Seal.
7. Notary affixes his/her signature.
8. Notary enters commission expiration date.

ACKNOWLEDGMENT BY PRINCIPAL IF CORPORATION

9. Enter name of State.
10. Enter name of Country.
11. Enter name of Notary Public witnessing transactions.
12. Enter name of Corporate Officer signing bond.
13. Enter Title of Corporate Officer signing bond. (Must be President or Vice President of Corporation; Manager or Managing Member of Limited Liability Company)
14. Enter name of Company or Corporation.
15. Notary enters date bond was witnessed. Must be the same as or later than signature date.
16. Affix notary Seal.
17. Notary affixes his/her signature.
18. Notary enters commission expiration date.

ACKNOWLEDGMENT BY SURETY

19. Enter name of State.
20. Enter name of Country.
21. Enter name of Notary Public witnessing transactions.
22. Enter name of person having power of attorney to bind Surety Company.
23. Enter Title of person binding Surety Company.
24. Enter name of Insurance Company (Surety).
25. Notary enters date bond was witnessed. Must be the same as or later than signature date.
26. Affix Notary Seal.
27. Notary affixes his/her signature.
28. Notary enters commission expiration date.

POWER OF ATTORNEY INSTRUCTIONS

Power of attorney for surety must be attached showing that it was in full force and effect on signature date indicated on the face of the bond. A corporate seal must also be affixed to the Power of Attorney form.

- a. Name of attorney in fact must be listed.
- b. Power of Attorney may not exceed imposed limitations.
- c. Certificate date, the signature date of bond must be entered.
- d. Signature of authorizing official must be affixed. (Signature may be facsimile).
- e. **Seal must be affixed.**

DECLARATION

I/We declare that the above statements are true and complete.

At the present time, other than as stated above, I / We have no reason to anticipate any claim being brought against me/s that would constitute a claim under the insurance now being renewed or applied for.

I / We declare that in the event of this being a renewal of a policy, there have been no material alterations to the risk as submitted to the underwriter originally, and if a new application that all material facts have been disclosed.

I/We agree that this declaration shall form, together with the proposal form, the basis of the contract between me/us and the Insurers, and that I/We are properly authorised to sign this declaration.

Full name:

Capacity:

Signature:

Date:
