



Insurance Services Inc.

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## FINAL BOND REQUEST FORM

When ordering Performance/Payment bonds please provide ALL of the requested information. Please submit your request as early as possible so that there is enough time to address any questions or additional requirements the underwriter may have for an approval. **BE SURE TO SEND/FAX COPY OF AWARD LETTER, CONTRACT, (IF AVAILABLE), WARRANTY REQUIREMENT and BID RESULTS IF NOT ALREADY PROVIDED TO US. AWARD LETTER OR CONTRACT MUST SPECIFY CONTRACT AMOUNT.** Thank You.

**Principal** \_\_\_\_\_

(You, the Contractor)

**Obligee (Name & Address)** \_\_\_\_\_

(The person or entity requiring the bond)

**Owner (if different from Obligee)** \_\_\_\_\_

**Project Title** \_\_\_\_\_

(Exactly as shown on Contract Docs.)

**Project Description** \_\_\_\_\_

(Scope of Work)

**Contract/Solicitation No.** \_\_\_\_\_ **Awarded from Bid** \_\_\_ **Contract Negotiated** \_\_\_ **Other** \_\_\_

**Contract Amount \$** \_\_\_\_\_ **Subcontract: Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Bonds: Performance %** \_\_\_ **Amount \$** \_\_\_\_\_ **Payment %** \_\_\_ **Amount \$** \_\_\_\_\_

**Bond Form: Special (Obligee or Govt.)** \_\_\_ **Standard (AIA or Surety Co.)** \_\_\_ **Number of Originals** \_\_\_

**Liquidated Damages or Penalties \$** \_\_\_\_\_ **per c/day** \_\_\_\_\_ **w/day** \_\_\_\_\_ **other** \_\_\_\_\_

**Completion Time:** \_\_\_\_\_ **c/days** \_\_\_\_\_ **w/days** \_\_\_\_\_ **Estimated Profit \$** \_\_\_\_\_

**Estimated Start Date:** \_\_\_\_\_ **Estimated Completion Date:** \_\_\_\_\_

**Warranty Period** \_\_\_\_\_ **Asbestos removal: Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Percent Subcontractors** \_\_\_\_\_ **% Percent (%) of Sub breakdown** \_\_\_\_\_

**Current Work in Progress \$** \_\_\_\_\_ **# of Jobs** \_\_\_\_\_

**For South Coast Surety / Underwriter Use Only:**

Approved \_\_\_\_\_ Declined \_\_\_\_\_ Date \_\_\_\_\_ By: \_\_\_\_\_ Approval Conditions: \_\_\_\_\_