



# South Coast Surety

## 1-800-361-1720

Application Number: \_\_\_\_\_

For Office Use Only \_\_\_\_\_

### APPLICATION FOR NOTARY BOND

Applicant (For partnership, give full names of partners and trade names) Please print or type				Social Security #	Age	Married Single
Residence Address						
(Street and Number)		(City)	(State)	(Zip)	(Telephone #)	
Business Address						
(Street and Number)		(City)	(State)	(Zip)	(Telephone #)	
Occupation or business	How long so engaged?	Previous Surety Yes No If yes, give name and reason for change.				
Type of Bond			Amount of Bond	Effective Date		
Complete name and address of Obligee						

Bond Amount Term Premium  
 \$ 15,000 4 yr \$ 50.00

### Copy of Commission Required

Agency **SOUTH COAST SURETY** INSURANCE SERVICES, INC.

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 San Clemente, California 92673  
 949-361-1692 Fax 949-361-9926  
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 e-mail surety@ southcoastsurety.com

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Agent's Code 04-21062

CDOI Lic# 0B57612