



Surname	First Name	Date of Birth
Full Residence Address		

NOTE: Please complete reverse side first and transfer totals to balance sheet below.

ASSETS	\$	LIABILITIES	\$
Deposits in Banks and other Financial Institutions as per Schedule A.		Loans from Banks and other Financial Institutions as per Schedule A.	
Marketable stocks and bonds of public companies (present market value) as per Schedule B.		Borrowed or due on marketable stocks and bonds of public companies as per Schedule B.	
Stocks and bonds of private companies (present value) as per Schedule C.		Borrowed or due on stocks and bonds of private companies as per Schedule C.	
Accounts and notes receivable as per Schedule D.		Other loans and notes payable as per Schedule F.	
Real Estates (present market value) as per Schedule E.		Borrowed or due on real estate, including mortgages as per Schedule E.	
Other Assets as per Schedule G.		All other Debts and Liabilities as per Schedule G.	
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$

Questionnaire

Personal Net Worth:

1. What Life Insurance Policies do you have in place? State amounts and beneficiaries.

2. Are you endorser or guarantor for any person or corporation? (If so, please give names and amounts.) Yes No

3. Are there any judgements or lawsuits against you? (If so, please give details and amounts.) Yes No

4. Have you or has a company which you fully or partially own or owned ever failed in business? (If so, please specify when, why and under what name.) Yes No

5. Are you involved in more than one line of business? (If so, please give details.) Yes No

6. Please give as references the names and addresses of your bank and 2 people other than relatives to whom you are well known.

Name	Address	Occupation
Bank:		

I declare the information I have provided herein to be true and correct and I understand that the Western Surety Company in granting suretyship relies upon the accuracy and completeness of this statement.

I authorize use of the information requested on this form by Western Surety Company ("WSC") for the purposes of processing the application to which it relates, risk assessment, providing services, investigating claims, processing claims and any other purpose authorized by law (each, an "Authorized Purpose"). I authorize access to, and disclosure of, this information to those WSC employees, contractors, administrators, reinsurers and agents who have a need to know for any Authorized Purpose and to any other person as authorized by law. I authorize WSC to use any information about me contained in WSC's existing files for any Authorized Purpose. To the extent I am providing any information on this form about a third party, I confirm that I have the authority to provide such information.

I authorize WSC and its agents to periodically investigate my credit history, financial standing, character and reputation for any Authorized Purpose. I authorize any credit reporting agency, financial or other institution with whom I have had dealings and any reference provide by me to disclose to WSC and its agents any information about me in connection with any such investigation.

Signed this _____ day of _____, in the year _____ _____
Signature

Schedule A DEPOSITS IN OR LOANS FROM BANKS AND OTHER FINANCIAL INSTITUTIONS					
Name of Bank or Financial Institution	Type of Acct. or Certificate	In Whose Name		Amount on Deposit	Amount Owing
Schedule B MARKETABLE STOCKS AND BONDS OF PUBLIC COMPANIES					
Description	Number of Shares Owned	Total Cost	Present Market Value	Borrowed or Due on Same	
Schedule C STOCKS AND BONDS OF PRIVATE COMPANIES					
Name and Location of Company	Percentage of Stock Owned	Cost	Present Value	Borrowed or Due on Same	
	%				
	%				
	%				
	%				
Schedule D ACCOUNTS AND NOTES RECEIVABLE					
Description	Due from Whom	Amount	Date Due	Rate of Interest	
Schedule E REAL ESTATE					
Location	Type	Title in name of	Present Market Value	Mortgage Balance	Repayment Terms
Schedule F LOANS AND NOTES PAYABLE					
Description	To Whom Payable	Amount	Date Due	Rate of Interest	
Schedule G OTHER ASSETS AND LIABILITIES (including Credit Cards)					
Assets			Liabilities		
Description	Amount	Description	Amount		

Please transfer total of each schedule to balance sheet on front side.