

Maloney & Associates

Insurance Services

OB55425

435 West Grand Avenue • Escondido CA 92025 • (760) 738-2610 • FAX (760) 738-6855

DEVELOPERS GENERAL QUESTIONNAIRE

1. Developer's Name: _____

2. Business Address: _____

(City) (State) (Zip Code)

3. Phone: () _____ Fax: () _____

4. Applicant's Legal Structure (Corp., LLC, Partnership, Individual, etc..): _____

6. Contact Person: _____ 7. Title: _____

8. Type of Bond Needed: _____

9. To Whom Is Bond Given (Obligee): _____

10. Obligee Address: _____

11. Bond Amount: _____ 12. Requested Effective Date: _____

13. List the owners, partners or proprietors of your firm:

	<u>Name</u>	<u>Position</u>	<u>Yr. of Birth</u>	<u>% Owned</u>	<u>Name of Spouse</u>
A.	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
B.	_____	_____	_____	_____	_____

14. Occupation or Nature of Business: _____

15. Bank Reference (Branch): _____

16. Street Address: _____

17. Phone No. / Contact: _____

18. Previous Bonding Company:

	<u>Name</u>	<u>Reason(s) for leaving</u>
A.	_____	_____

19. List two business references :

	<u>Name</u>	<u>Address</u>	<u>Phone</u>
A.	_____	_____	_____
B.	_____	_____	_____

Completed by: _____
Date _____