



**Maloney & Associates**  
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OB55425

## GENERAL AGREEMENT OF INDEMNITY INFORMATION FORM

In order that we may complete the GAI the Surety Company requires the following information:

Exact name of Company as it appears on the Contractor's License:

\_\_\_\_\_  
Street Address for the Company:

\_\_\_\_\_  
Company Tax ID No.: \_\_\_\_\_ Contractor's License No.: \_\_\_\_\_

(Please provide copy of Articles of Incorporation showing company name and listing the Corporate Officers and copy of Contractor's License)

Full Legal Name:

President:	_____	Spouse:	_____
Vice President:	_____	Spouse:	_____
Secretary:	_____	Spouse:	_____
Treasurer:	_____	Spouse:	_____

Social Security Numbers of Officers and Spouses:

President:	_____	Spouse:	_____
Vice President:	_____	Spouse:	_____
Secretary:	_____	Spouse:	_____
Treasurer:	_____	Spouse:	_____

Home Address of Officers:

President/Spouse:	_____
Vice President/Spouse:	_____
Secretary/Spouse:	_____
Treasurer/Spouse:	_____

If a Trust has been established, please provide a copy of the Trust and list all Trustees and Trustors, including the Social Security Numbers and Home Address.

Once the above information is received, the General Agreement of Indemnity will be issued and mailed to you for signatures.

If you have any questions, please give us a call at 760/738-2610