



30 SOUTH ROAD • FARMINGTON, CT 06032
 TELEPHONE: (860) 415-8400 • FAX: (860) 404-5034

COMPLETION BOND SURVEY
(Site Plan Bond, Subdivision Bond)

We welcome the opportunity to secure bonding credit for your company. The purpose of this questionnaire is to assist us in evaluating your qualification. Please complete this form as accurately as possible. Every questions is important; please answer each one.

DEVELOPER NAME	PHONE NO.	DATE
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ADDRESS (Street)	(City)	(State)	(Zip)
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GENERAL INFORMATION

FORM OF BUSINESS(CHECK ONE)

Proprietorship
 Sub S Corporation
 Corporation
 Partnership
 Limited Liability Corporation

HISTORY

DATE BUSINESS ESTABLISHED	DATE INCORPORATED	NAME OF PREDECESSOR COMPANY	WHEN DID CURRENT MANAGEMENT ASSUME CONTROL?
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ORGANIZATION – OWNERS AND KEY EMPLOYEES

NAME	YEAR BORN	% of STOCK	NAME OF SPOUSE	SS #

PARENT, AFFILIATE AND/OR SUBSIDIARY COMPANIES

NAME	LOCATION	OWNED BY	SCOPE OF OPERATIONS

BUSINESS HISTORY

HAVE YOU EVER BEEN OR ARE YOU NOW AN OWNER, PARTNER OR STOCKHOLDER IN ANY OTHER BUSINESS? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete the following		1. NAME OF COMPANY	
2. TYPE OF BUSINESS	3. DATE BUSINESS BEGAN	4. <input type="checkbox"/> Corporation <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership	5. PERCENT OF BUSINESS YOU OWN %
6. NAMES OF OTHER OWNERS _____ _____ _____		7. ARE YOU CURRENTLY BONDED? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of bonding company	
8. IF BUSINESS IS NO LONGER ACTIVE, STATE REASON AND DATES BUSINESS TERMINATED OPERATIONS _____ _____ _____			

HAVE YOU OR ANY MEMBER OF THIS FIRM OR PREDECESSOR FIRMS WITH WHICH YOU HAVE BEEN INVOLVED, EVER DECLARED BANKRUPTCY, EITHER PERSONALLY OR CORPORATELY? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE EXPLAIN
ANY LITIGATION CURRENTLY PENDING? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF ANY PREVIOUS LITIGATION, HAVE ATTORNEY SEND A LETTER EXPLAINING DETAILS.
HAS ANY SURETY EVER DECLINED TO ISSUE A BOND FOR ANY OF THE ABOVE PARTIES? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE EXPLAIN
HAVE ANY LIENS BEEN FILED AGAINST ANY REAL ESTATE OF ANY OF THE ABOVE NAMED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE LIST: DATE FILED; AMOUNT; BY WHOM; DATE RELEASED AND DETAILS ON SEPARATE SHEET.

JOB INFORMATION

1. <input type="checkbox"/> COMMERCIAL SITE DEVELOPMENT (SKIP TO Q.2) <input type="checkbox"/> RESIDENTIAL SUBDIVISION (COMPLETE THE FOLLOWING)		
a) NAME OF SUBDIVISION	b) TRACK NUMBER	
c) NAME OF LEGAL ENTITY HOLDING TITLE TO TRACK	d) NUMBER OF HOUSES	
e) UNIT SELLING PRICE FROM \$ _____ TO \$ _____	f) NUMBER OF DEPOSITS RECEIVED	
g) UNIT SQUARE FEET	h) NUMBER OF CONTRACTS SIGNED	
i) COST OF LAND	j) COST PER LOT	
2. NAME OF CONTRACTOR DOING WORK	CONTACT PERSON	PHONE NUMBER
3. NAME AND ADDRESS OF MAJOR SUBCONTRACTORS:	CONTACT PERSON	PHONE NUMBER
4. CONSTRUCTION LENDING: NAME OF BANK	AMOUNT OF CONSTRUCTION LOAN \$	HOW IS LOAN SECURED?

CHECKLIST OF ITEMS NEEDED TO ESTABLISH BONDING LINE LIMITS:

1. Completed Completion Bond Questionnaire (this form)

2. Financial Statements – signed by the owners.

Separate Financial Statements for each entity – CPA prepared.

Personal Financial Statements –
required for each owner with 5% or more ownership.
most current one year statement.

3. Bank Reference Letter

Copy of Bank Commitment Letter providing financing for this job.

The following information on the bank’s letterhead is needed; number of years the contractor has been banking with this bank, average balance of deposits, has the bank loaned money to the contractor (maximum amounts loaned, secured and/or unsecured), any overdrafts or returned checks and any general comments.

Include copies of lines of credit showing all terms and conditions of credit.

This application consists of the instrument, the financial statements and all indemnity, security and trust agreements signed by the applicant with regard to the bond or bonds hereby requested, such financial statements and agreements being incorporated hereby by reference.

In addition, the routine verification of information pertinent to the bond applied for, if the application is by an individual primarily for personal purposes, or if the application is for a bond primarily for the benefit of a corporation and the said application is also executed by the officers of the corporation in a personal capacity, thereby acting as a co-guarantor thereof, ACSTAR Insurance Company may have an investigative consumer report made including information bearing on the character, general reputation personal characteristics or mode of living of said individual(s) and upon written request of said individuals will disclose in writing the nature and scope of the investigation requested.

The representations contained in this application and in the financial statements are warranted by the applicant to be true.

Dated _____ (x) _____

(x) _____

Subscribed and sworn to me on this the _____ day of _____, _____.

County of _____ _____

Signature of Notary Public

State of _____

My commission expires: _____ (Place seal here)