



# Certificate of Title Application

<b>APPLICANT INFORMATION</b>	Applicant Name				<input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> LLC		
Nature of Business or Occupation			Number of Years in Business?				
<b>PERSONAL INFORMATION</b>							
Individual's Name			Social Security No.		Date of Birth		<input type="checkbox"/> Married <input type="checkbox"/> Single
Residence Address			City		State		Zip Code
<b>BOND DESCRIPTION</b>	Amount of Bond			Effective Date			
Complete Name and Address of Obligeo							
<b>VEHICLE INFORMATION</b>	Make			Model		Body Type / Style	
License #		Year	Model I.D.#		VIN / Manufacturer #		
State License Issued				Number of Cylinders			
<b>INDEMNIFICATION AGREEMENT</b>	Signature Instructions: <b>Sole Proprietorship</b> - Owner must sign below. If married, spouse should also sign. <b>Partnership</b> - Each partner and his or her spouse should sign below. <b>Corporation</b> - An authorized officer (President or Secretary) should sign below on behalf of the corporation indicating his or her corporate title. All owners should sign below the corporate signature only writing the word "indemnitor" after their names.						
<p>I agree to indemnify <b>RLI Insurance Company</b> and/or <b>RLI Indemnity Company</b> and/or <b>Contractors Bonding and Insurance Company</b> (hereinafter "Surety") in connection with any bond executed on behalf of the person or entity named as "Applicant" above. I certify that all the information provided is true, and acknowledge that Surety is relying on this information to issue a bond. I agree that proof of the falsity of any statement will be prima facie proof of material, intentional and fraudulent misrepresentation for all purposes of law and equity. I authorize Surety or its agents to investigate my credit, now and at any time in the future, with any institution, person or entity. I further agree: <b>FIRST:</b> To pay Surety each premium or premiums due, until satisfactory evidence that Surety's liability is terminated and agree that such premium is fully earned upon issuance of a bond and is not refundable in the first year of coverage. <b>SECOND:</b> To pay Surety all sums demanded by Surety to cover any liability, claim, suit or judgement against the bond, including any legal fees and expenses, and a claim fee charge in the amount of \$119.40 for the first claim and \$69.44 for each additional claim. <b>THIRD:</b> To hold harmless and indemnify Surety from any and all liability, damages, losses, costs and expenses of every kind including attorney fees, which may be sustained or incurred arising out of the execution enforcement, procurement of release, or other action involving the application and/or issuance of any bond. <b>FOURTH:</b> To pay interest, at the highest legal rate allowed, in the event of any payment by Surety, from the date such payments are made. <b>FIFTH:</b> That Surety has the exclusive right to defend, settle, pay or appeal any claim, and an itemized statement of loss and expense incurred by Surety shall be prima facie evidence of the fact and extent of my liability to Surety. <b>SIXTH:</b> That Surety may decline to become a surety on any bond, may cancel or amend any bond with or without cause, alter the penalty, terms and conditions of any bond, complete any blanks contained in the application or indemnity agreement at the time of execution, or procure its release from said suretyship under any law for release of sureties; all without liability to Surety thereon. <b>SEVENTH:</b> To provide Surety with cash or other property acceptable to Surety, upon demand, as collateral security for any loss reserve. Surety may hold such collateral security until it has determined that it is no longer exposed to a loss and may retain or sell the collateral security to reimburse itself. <b>EIGHTH:</b> That a facsimile copy of this agreement shall be considered an original and shall be admissible in a court of law to the same extent as the original agreement. <b>NINTH:</b> I agree that I cannot terminate my liability to the Surety created by this agreement except by sending written notice by certified mail of intent to terminate to the Surety. Written notice to terminate shall be sent to the Surety at its home office, 9025 N. Lindbergh Dr. Peoria, IL 61615. I agree that the termination will be effective thirty working days after the actual receipt of such notice by the Surety, but only for bonds signed or committed to by Surety after the effective date. Thus, I agree that I will remain liable to the Surety for loss and expenses on bonds signed or committed to by Surety prior to the effective date of termination. <b>TENTH:</b> This agreement shall apply to all renewals, continuations, substitutions and extensions of the suretyship herein applied for.</p>							
Today's Date _____			Applicant Name (Printed)		_____		
					X _____		
					_____		
					_____		
<b>AGENT/BROKER INFORMATION</b>	Agent/Broker Name		Code	Phone No.	Fax No.	City	State    Zip
<b>AGENT'S RECOMMENDATION</b>				<b>COMMENTS</b>			
<input type="checkbox"/> We are not very familiar with this applicant. <input type="checkbox"/> We are familiar with applicant and are aware of no adverse information about him/her. <input type="checkbox"/> We know applicant very well and offer our highest recommendation.				_____ _____ _____			