

Department of Revenue Services  
PO Box 2937  
Hartford CT 06104-2937

# Form OR-131

## Surety Tax Bond

(Rev. 02/06)

Type of bond

Bond Number

### Know all men by these presents

That we \_\_\_\_\_  
of \_\_\_\_\_  
County of \_\_\_\_\_ and State of \_\_\_\_\_,  
as Principal, and \_\_\_\_\_  
of \_\_\_\_\_  
County of \_\_\_\_\_ and State of \_\_\_\_\_,  
duly authorized to do business in the State of Connecticut as a Surety, are held and firmly bound unto the Commissioner of Revenue Services of the State of Connecticut and his successors in office in the sum of \_\_\_\_\_ for the payment of which well and truly to be made the said Principal and Surety do jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns, each and every of them firmly by these presents.

### The conditions of this obligation are such that

Whereas, the Principal has made application to the Commissioner of Revenue Services of the State of Connecticut for a license, permit, or permission to engage in the business as a \_\_\_\_\_  
\_\_\_\_\_ under the provisions of Chapter 221 of the Connecticut General Statutes for the period beginning \_\_\_\_\_, \_\_\_\_\_ and ending \_\_\_\_\_.

**Therefore**, if the said Commissioner of Revenue Services shall grant the application referred to above and the Principal shall pay all taxes, interest, and penalties in accordance with the provisions of the Connecticut General Statutes pertaining to such business, then this obligation shall be null and void; otherwise this bond is to remain in full force and effect.

This bond is for a period beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_.

This bond shall remain in full force and effect for three years and one month following such ending date.

**In witness whereof**, said Principal and Surety have signed and sealed this instrument this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Principal Corporate seal

By: \_\_\_\_\_ L.S.  
Title

\_\_\_\_\_  
Witness as to Principal

By: \_\_\_\_\_ L.S.  
Title

By: \_\_\_\_\_ L.S.  
Title

\_\_\_\_\_  
Name of Surety Corporate seal

\_\_\_\_\_  
Witness as to Surety

By: \_\_\_\_\_ L.S.

By: \_\_\_\_\_ L.S.

Attorney in Fact