

Initial/New Application

Bond Number: _____

Premium Finance Company Surety Bond

As required by NCGS 58-35-15		
KNOW ALL MEN BY THESE PRESENTS: That we		of as principal, and
		anized and existing under the laws of
	, as surety, are held and firmly bound	
	for the payment of which,	will and truly be made, we and each
of us bind ourselves, our heirs, successors and assign	s, firmly by these presents.	
The conditions of this obligation is such that the said Pri	ncipal has applied to the Commissioner of Insurance of the S	tate of North Carolina for a license to
engage in the business of financing insurance premiums	s pursuant to Section 58-35-5 of the General Statutes of the S	tate of North Carolina and in accord-
ance with the regulations issued thereunder is required	to give a surety bond unto the State of North Carolina.	
cipal shall conduct such business in full compliance wit scribed by the Commissioner of Insurance pursuant to void; otherwise to remain in full force and effect; provi the conditions of this bond exceed in the aggregate pe conditions of this bond at the end of thirty (30) days af Carolina of its desire to terminate to be so released. This bond shall be continuous; beginning on the date the surety is released from liability by the Commission prior to such cancellation, the surety may cancel this	pal shall be licensed by the Commissioner of Insurance to combine the provisions of the laws of the State of North Carolina are law pertaining to Insurance Premium Finance Companies, the ded, however; in no event shall the liability of the Surety to a mal sum of this bond. The Surety herein shall be relieved of litter serving written notice to the Principal and the Commission such license becomes effective, and shall remain in force oner or until the bond is canceled by the surety. Without purposed upon 30 days advance notice in writing filed with the the surety caused these presents to be signed by its dull bove written.	nd the rules and regulations pre- nen this obligation shall be null and all such persons for all breaches of liability as to future breaches of the oner of Insurance, State of North during all succeeding periods until orejudice to any liability accrued the Commissioner and the principal.
	WER OF ATTORNEY MUST BE ATTACHED	
Signed and s	ealed tills day of, 20	
urety Company Name:	Permit Holder/Principal Name:	Effective Date:
uthorized Representative (print name):	Authorized Representative (print name):	Expiration Date: (not before June 30th)
ignature:	Signature:	Title
SURETY NOTARY	ACKNOWLEDGEMENT]	

_____ County of _____

Sworn to and subscribed before me this _____day of ______, 20_____

Notary Public _____ My commission expires: _____

State of _____





Expiration dates for initial/new surety bonds and/or renewal continuation certificates should be extended to the end of next year's licensing period

June 30th

MAILING ADDRESS:

[bonds only]

NC Department of Insurance/ASD ATTN: NIBE Team 1204 Mail Service Center Raleigh NC 27699-1204