**Application Form – FMCSA (BMC-84 or ICC) Bond**

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| Applicant's Full Legal Name EXACTLY as Registered with the FMCSA (Please include any comma or dot):**COMPANY NAME**:       |
| **[ ]** Sole Ownership -[ ]  Partnership - [ ] Corporation - [ ] LLC |
| Legal Name and Title of person who will sign the bond (this must match what company has on file with the FMCSA)**Name**:       **Title**:       |
| Home Address       | Home Phone:       |
| Business Address      | Phone:       | Fax:       |
| E-mail:       | Country or State of Incorporation:       |
| Gross Freight Receipts:       | Number of years in business?       |
| Type of Bond: FMCSA (BMC-84) | IRS #:      | MC# / FF#:      | Term: Continuous | Amount:75,000.00 | Effective Date (Desired):      |
| Has application for this bond been declined by another company? If yes, state particulars      |
| If prior Surety, give name and reason for change:       |
| Name and Address of Obligee **FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION** |
| Has the business or any other principal involved: | Yes | No | If any answer is yes, attach a detailed statement |
| a. Had any lawsuits, judgments, or liens against them? |  |  |
| b. Ever failed in business or declared Bankruptcy? |  |  |
| c. Ever been convicted of a felony? |  |  |
| d. Ever had their license suspended, revoked or denied? |  |  |
| e. Ever been a party to a surety bond claim? |  |  |
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| Fidelity Insurance - Carrier: |   |
| Fidelity Insurance - Limits: |  |
| Fidelity Insurance - Deductible: |  |

Info for all owners to complete – Please include information for parent company as well

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| Name/Title: |        | Social Security #: |        |
| Spouse: |        | Social Security #: |        |
| % ownership: |        | # years owned business: |        | # years ocean cargo/freight experience: |        |
| Address and Home phone:        | Balance of Mortgage: |        |
| Fair market value of home: |        |

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| Name/Title: |        | Social Security #: |        |
| Spouse: |        | Social Security #: |        |
| % ownership: |        | # years owned business: |        | # years ocean cargo/freight experience: |        |
| Address and Home phone :       | Balance of Mortgage: |        |
| Fair market value of home: |         |