

Personal Financials

First Name							
Last Name							
Home Address							
City		State			Zip Code		
Social Security Number							
Spouse Full Name							
Spouse Social Security Number							

ASSETS		Value
Cash in bank		
Government and Listed & Unlisted Securities		
No. of Shares or Par Value of Bonds	Description	
Accounts and Note Receivable		
Trade		
Relative and Friends		
Others		
Investment in Business		
Real Estate Owned		
Description and location	Date Acquired	
Vested Interest in Deferred Compensation Plans		
Automobile(s)		
Other Personal Property		
Other Assets - Itemize		
Total Assets		

You Can Learn More About Our Company @ Our Website: www.PlatinumBonds.com

Platinum Bonds Insurance Agency

15615 Alton Parkway, Suite 450
Irvine CA 92618

Toll Free **Phone** (866) 409-2477
Toll Free **Fax** (866) 299-6242
CA License Number 0E75926

Website www.PlatinumBonds.com
e-Mail: Marketing@platinumbonds.com

General Information

Are you a defendant in Suits or Legal Action?

Have you ever had any tax liens?

If so what year?

Are they paid?

Have you ever filled Bankruptcy

If so what year was it discharge?

Have you ever had a civil judgment?

If so what year?

Had it been satisfied?

Have you had any late pays on your personal credit in the past five years?

If so approximately how many?

Are they currently delinquent?

Have you had any collection on your personal credit?

If so How many?

Have they been paid?

How long ago?

Overall How would you describe your personal credit?

Have you ever had a surety Claim?

If so was the surety reimbursed?

Do you owe any back due Child or Spousal Support

I authorize Platinum Insurance and Bonds, Inc. / and the Surety and/or Surety broker of their choice to make inquiries as necessary concerning or pertaining to the Owner(s), applicant(s), and third party indemnitor(s) listed in this application financial standing, credit report, character or manner of meeting obligations to verify the accuracy of the statements made and to determine their credit worthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). A copy of this agreement shall be considered the same as the original. This authorization is to remain in full force until rescinded by the applicant in writing. These statements are made for the purpose of obtaining a bond. I understand FALSE statements may result in forfeiture of benefits and possible prosecution. "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing false, or misleading information may be found guilty of a criminal and/or civil offense."

FAIR CREDIT REPORTING ACT NOTICE:

In accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), revised effective September 30, 1997, this information may only be used to verify a statement(s) made by an individual in connection with legitimate business needs. The depth of information available varies from state to state. Status of updates are available on request. Although every effort has been made to assure accuracy, the reporting agencies cannot act as guarantor of information accuracy or completeness. Final verification of an individual's identity and proper use of report contents are the user's responsibility. The reporting agency's policy requires purchasers of these reports to have signed a Service Agreement. This assures the reporting agency that users are familiar with and will abide by their obligations, as stated in the FCRA, revised effective September 30, 1997, to the individuals named in these reports. If information contained in this report is responsible for the suspension or termination of an employee or denial of an application, the name and telephone number of the reporting agency will be provided in writing to contact them directly and request copies of such reports

Sign Here		Date	
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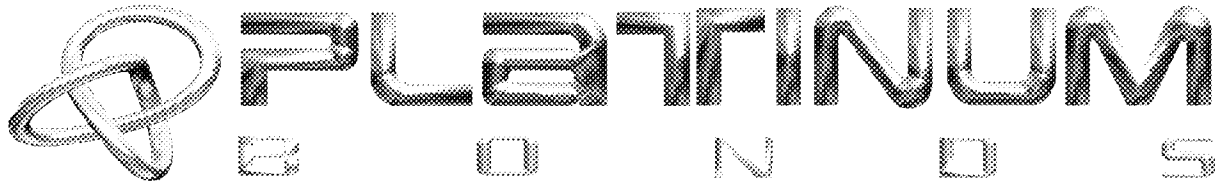
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e-Mail:

Marketing@platinumbonds.com



Resume

First Name			
Last Name			
Home Address			
City		State	
Social Security Number		Zip Code	

High School Diploma or GED?			
Are you a College Graduate?			
If so from what years		From	To
Courses Studied?			
Special Education relating to current business activity?			

PROFESSIONAL REFERENCES

Name	Address	Phone #	Years Known

BUSINESS AND PROFESSIONAL EXPERIENCE

(Begin with current job)

From		To		Company	
Position				Responsibilities	
From		To		Company	
Position				Responsibilities	
From		To		Company	
Position				Responsibilities	

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