



CONTRACTORS SURETY SURVEY

MINARD-AMES
INSURANCE SERVICES LLC



NAME _____
ADDRESS _____
PHONE/FAX _____
EMAIL _____

- "C" Corporation "S" Corporation
- Partnership Limited Partnership
- Limited Liability Corporation
- Proprietorship

I. ORGANIZATION AND BACKGROUND

TAX ID Number: _____

A. Date Business Formed _____ B. Date Incorporated _____

C. If SUCCESSOR to Prior Business, Name of Predecessor _____

D. List of Officers/Owners and Key Personnel

NAME	POSITION & RESPONSIBILITY	% OF OWNERSHIP	DATE OF BIRTH	YEARS & EXPERIENCE IN CONSTRUCTION

E. List of Affiliated, Subsidiary or Related Companies in which this Firm or Its Stockholders Have an Interest

NAME & ADDRESS	STOCK OWNERSHIP	SCOPE OF OPERATIONS	DOES THE PRINCIPAL OR STOCKHOLDERS GUARANTEE ANY LOANS TO THE ENTITY?

F. Name the surety company presently providing contract bonds and through which agency. _____

G. Why is a change desired? _____

H. What company/companies were Surety prior to present one? _____

I. State limits and Carrier of Liability and Worker's Comp Insurance. _____

II. SCOPE OF OPERATION

Type of Construction _____ Territory _____

A. What percentage of work is as: 1. prime? _____
2. sub? _____

B. How much of an average job is: 1. subbed? _____
2. made up of materials? _____

C. Are bonds required from subcontractors? _____
When? _____

D. What was largest work-on-hand carried in the past? _____
When? _____



E. What size jobs and total work program does contractor feel best able to handle? _____

F. Approximately what percent of work requires contract bonds? _____

G. Is this a union or non-union contractor? _____

H. Has contractor or any of the owners ever:
1. defaulted on a contract? _____ If yes, give details. _____

2. caused a Surety to pay a loss? _____ If yes, give details. _____

3. declared bankruptcy? _____ If yes, give details. _____

I. List of Largest Jobs Completed

Contract Price	Year	Type of Work	Name and Address Of Architect/Engineer	Owner/General Contractor Contact Name/Phone #	Description of Job

J. In regard to present work-on-hand:
 1. were bids in line with other bidders? _____
 2. are projects all on schedule? _____
 3. are there any delays or disputes? _____

K. In regard to contractor's equipment:
 1. is equipment adequate for work program? _____
 2. if not, what expenditures are anticipated? _____
 3. is equipment owned or leased? _____



III. CREDIT INFORMATION

A: Creditors List of Suppliers from Whom Contractor Buys Most Materials

Name	Address	Contact Name & Phone Number

B: Are bills paid in a discount/prompt manner? _____
 If not, why? _____

C: Bank

Name and Address	Bank Officer/Phone Number	Line of Credit Established	Nature of Security And/or Name of Endorser

D. Life Insurance

Amount	Insured	Beneficiary	Insuror	Cash Surrender Value

IV. FINANCIAL DATA

*****ATTACH LAST THREE (3) FISCAL YEAR-END FINANCIAL STATEMENTS. ALSO, IF A 6 MONTH STATEMENT IS AVAILABLE FOR THE CURRENT YEAR, PLEASE FURNISH.*****

A: What is fiscal year-end? _____

B: If statements are not CPA prepared, will one be considered? _____

C: What method of accounting is used in preparing statements?
 Completed Contract % of Completion Simple Accrual

D: On what basis of accounting are taxes paid?
 Completed Contract % of Completion Accrual Cash

E: In what year was contractor last checked by I.R.S.? _____

F: What portion of inventory shown on financial statement is material for jobs in progress? _____

G. Is personal indemnity of the owners/stockholders available? _____

Whose? _____



*****ATTACH PERSONAL STATEMENTS OF INDEMNITORS CONCURRENT WITH FISCAL YEAR-END OF CONTRACTOR*****

H. Is a formal continuity plan in effect? _____

I. Have operations been profitable since statement date? _____

J. Have any changes occurred since statement date such as acquisition of additional equipment, purchase of fixed assets, loans to officers, investments, withdrawals or dividends that would significantly affect financial condition of contractor?

K. Are any new ventures or investments contemplated? _____

V. NEEDS

A. Desired annual volume _____

B. Desired maximum uncompleted work-on-hand at any one time _____

C. Desired maximum size of single job _____

The above answers are true to the best of my knowledge and belief.

Signature

Date