

THIS BOND SHALL BE FILED WITH THE REGISTRAR OF CONTRACTORS

STATE OF CALIFORNIA
CONTRACTORS STATE LICENSE BOARD

SURETY CODE _____

BOND NO. _____

LICENSE NO. _____

OR

APP. FEE NO. _____

Bond of Qualifying Individual

(BUSINESS AND PROFESSIONS CODE SECTIONS 7071.5-7071.11)

The premium on this bond is _____ for the term _____ to _____.

KNOW ALL BY THESE PRESENTS: That _____,

NAME OF QUALIFYING INDIVIDUAL

whose address for service is _____

STREET ADDRESS

CITY

STATE

ZIP CODE

as Principal, and _____

NAME OF SURETY

a corporation organized under the laws of _____ and authorized to transact a general surety business in the State of California, as Surety, are held and firmly bound unto the State of California, for the payment of which well and truly to be made we bind ourselves, our heirs, administrators, successors and assigns, jointly and severally, firmly by these presents. This bond is filed pursuant to the provisions of Sections 7071.9-7071.11, Business and Professions Code, in respect to the principal as qualifying individual covering the person or firm as a licensee under Division 3, Chapter 9, *Business and Professions Code*.

BUSINESS NAME SHOWN ON APPLICATION OR LICENSE

STREET ADDRESS

CITY

STATE

ZIP CODE

WHEREAS, The above-bounden Principal is required by the provisions of Section 7071.9 of the Business and Professions Code to file or have on file a bond as therein prescribed in the amount of _____ Dollars (_____), and said Principal admits it is so required; and

NOW THEREFORE, The conditions of the foregoing obligation are that if the Principal shall comply with and be subject to the provisions of Division 3, Chapter 9 (commencing with Section 7000) of the *Business and Professions Code*, then this obligation shall be null and void; otherwise to remain in full force and effect.

PROVIDED HOWEVER, This bond is issued subject to the following express conditions:

1. This bond may be cancelled by the Surety in accordance with the provisions of Sections 996.310 et seq. of the *Code of Civil Procedure*.
2. This bond shall be deemed continuous in form and shall remain in full force and effect and shall run concurrently with the license period for which license is granted and each and every succeeding license period or periods for which said Principal may be licensed, after which liability hereunder shall cease except as to any liability or indebtedness therefore incurred or accrued hereunder.
3. The limitation of the liability of the surety and the conditions of the bond are as set forth in Sections 7071.9, 7071.10 and 7071.11, *Business and Professions Code* and any person claiming against said bond may bring an action in a proper court on this bond for the amount of the damage he may suffer as a result of such acts or omissions by the Principal except that such action must be brought within two (2) years after the expiration of the license period during which the act or omission occurred, or within two (2) years of the date of license of active licensee was inactivated, canceled or revoked, whichever occurs first, except provided further that a claim for fringe benefits shall be brought within six (6) months after the date the fringe benefit delinquencies were discovered, and any civil action thereon shall be filed within two (2) years after the date the fringe benefit contributions were due.
4. This bond is executed by the Surety to comply with the provisions of Division 3, Chapter 9, (commencing with Section 7000) of the *Business and Professions Code* and of Chapter 2, Title 14, Part 2 (commencing with Section 995.010) of the *Code of Civil Procedure* and said bond shall be subject to all of the terms and provisions thereof.
5. This bond to become effective _____

DATE

NAME OF SURETY

ADDRESS FOR SERVICE

I certify (or declare) under penalty of perjury under the laws of the State of California that I have executed the foregoing bond under an unrevoked power of attorney.

Executed in _____ on _____, under the laws of the State of California.

CITY AND STATE

DATE

Certificate of Authority # _____ Signature of Attorney-in-Fact _____

Printed or Typed Name of Attorney-in-Fact _____

Address of Attorney-in-Fact _____

Telephone Number of Attorney-in-Fact _____

