



Montana Department of Agriculture

Agricultural Sciences Division

PO Box 200201 - Helena, MT 59620-0201

Phone (406) 444-3730 • fax (406) 444-7336 • agr@mt.gov • www.agr.mt.gov

COMMODITY DEALER / COMMODITY WAREHOUSE BOND AGREEMENT

KNOW ALL MEN BY THESE PRESENTS: BOND NO. \_\_\_\_\_

THAT \_\_\_\_\_

(Principal)

of \_\_\_\_\_ State of \_\_\_\_\_

(Address)

as Principal, and \_\_\_\_\_

(Bonding Company)

State of \_\_\_\_\_, as Surety are held and firmly bound unto the State of Montana, as oblige for the benefit of all parties, in the penal sum of:

\_\_\_\_\_ Dollars ( ) as Commodity Dealer,

and/or \_\_\_\_\_

\_\_\_\_\_ Dollars ( ) as Commodity Warehouse.

The payment of which sum(s), well and truly made, we bind ourselves, our heirs, and our executors and administrators, successors and assigns, jointly, severally, and firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH that WHEREAS, the above bound principal has applied to the Department of Agriculture of the State of Montana for a | | Commodity Dealer and | | Commodity Warehouse license.

NOW, THEREFORE, If the appropriate licenses(s) is granted to the said Principal and such licensee complies with provisions of Title 80, Chapter 4, MCA, as commencing \_\_\_\_\_ through June 30 of each year, then the above obligations shall be void; otherwise to be and remain in full force and effect. The aggregate liability of the surety may not exceed the sums(s) of the bond for any one licensing year.

It is understood and agreed that this bond is continuous in nature until canceled.

It is further understood and agreed that a bond may not be canceled without 60 days written notice by certified mail to the oblige.

IN WITNESS WHEREOF, the said principal and said Surety have hereunto affixed their hands and seals this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Principle's Name

\_\_\_\_\_  
President's Signature

\_\_\_\_\_  
Secretary's Signature

\_\_\_\_\_  
Surety Company's Name

\_\_\_\_\_  
Attorney-in-fact

\_\_\_\_\_  
Licensed Resident Agent of Montana

\_\_\_\_\_  
City, State

ACKNOWLEDGEMENT

State of \_\_\_\_\_ County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_

\_\_\_\_\_  
Notary Public's Signature

(Notary's Seal)