

Bid Bond Request

GENERAL INFORMATION

Contractor: _____

Obligee: _____

Address: _____

Job Description: _____

Start Date: _____ Completion Date: _____

Liquidated Damages: _____ Maintenance Period: _____

Comments / Special Instructions: _____

BID BOND DETAILS

Bid Date and Time: _____ Bid Percentage: _____

Estimate (\$): _____ Current Work on Hand (\$): _____

Bond Form to be Used: Surety Form Obligee's Form (Attached Obligee's Form)

DELIVERY INSTRUCTIONS

Mail to Insured

Pick Up - OutBox Front Desk

Fax to Insured

Fax to Other: _____

Over Night Delivery

Email to Other: _____

CONTACT INFORMATION

Bond Requested By _____ Date _____

Fax To: (248) 355-2188