

Agency Name: \_\_\_\_\_  
Agency Code: \_\_\_\_\_



Individual   
Partnership   
Corporation   
Limited Liability Company

## APPLICATION FOR VEHICLE DEALER BOND

### PLEASE PRINT OR TYPE

**Applicant(s)** - Individual, partners, or corporate owner(s). List the principal owner first. Attach additional Form 29166 and cross reference if more than three owners. **EACH MUST SIGN AT BOTTOM RIGHT.**

1. Applicant \_\_\_\_\_  
Residence Address \_\_\_\_\_

Social Security No. \_\_\_\_\_  Single  
Date of Birth \_\_\_\_\_  Married (spouse must sign at bottom right.)

Does this applicant own residential real estate?  Yes  No  
commercial real estate?  Yes  No

2. Applicant \_\_\_\_\_  
Residence Address \_\_\_\_\_

Social Security No. \_\_\_\_\_  Single  
Date of Birth \_\_\_\_\_  Married (spouse must sign at bottom right.)

Does this applicant own residential real estate?  Yes  No  
commercial real estate?  Yes  No

3. Applicant \_\_\_\_\_  
Residence Address \_\_\_\_\_

Social Security No. \_\_\_\_\_  Single  
Date of Birth \_\_\_\_\_  Married (spouse must sign at bottom right.)

Does this applicant own residential real estate?  Yes  No  
commercial real estate?  Yes  No

**Business or Corporate Name:** \_\_\_\_\_

Business Address \_\_\_\_\_

Number of Years in this Business: \_\_\_\_\_

Number of Years as a Licensed Dealer: \_\_\_\_\_

Amount of Bond: \$ \_\_\_\_\_

Effective date: \_\_\_\_\_

**State or governmental entity requiring this bond (and address):** \_\_\_\_\_

If the garage liability coverage written in an Auto-Owners Group Company?  Yes  No

If yes, give policy number \_\_\_\_\_

**KENTUCKY ONLY**

1. Risk is exempt from municipal tax  Yes  No  
2. Tax code of jurisdiction where bond is filed \_\_\_\_\_

A. If Yes explain why? \_\_\_\_\_  
A. Other tax code if applicable \_\_\_\_\_

**FLORIDA ONLY** "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

**ALL STATES EXCEPT FLORIDA** "Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and may be subject to penalties including imprisonment, fines and denial of insurance benefits."

### INDEMNITY AGREEMENT

The undersigned applicant and indemnitors hereby request **Auto-Owners Insurance Company** (the "Company") to become surety for the above bond. The undersigned hereby certify the truth of all statements in the application, authorize the Company to verify this information and to obtain additional information from any source, including obtaining a credit report at the time of application, in any review or renewal, at the time of any potential or actual claim, or for any other legitimate purposes as determined by the Company in its reasonable discretion, and jointly and severally agree:

- To pay the usual premiums, including renewal premiums, to the Company or its agents, when due,
- To completely **INDEMNIFY** the Company from and against any liability, loss, cost, attorney's fees and expenses whatsoever which the Company shall at any time sustain as surety or by reason of having been surety on the bond or any other bond issued for the applicant, or for the enforcement of this agreement, or in obtaining a release or evidence of termination under such bonds; regardless of whether such liability, loss, costs, damages, attorney's fees and expenses are caused, or alleged to be caused, by the negligence of the Company,
- To furnish the Company with satisfactory and conclusive termination evidence that there is no further liability on this bond or any other bond issued for applicant,
- Upon demand by the Company for any reason whatsoever, to deposit current funds with the Company in an amount sufficient to satisfy any claim against the Company by reason of such suretyship,
- That the Company shall have the right to handle or settle any claim or suit in good faith. An itemized statement of loss and expense incurred by the Company, sworn to by an officer of the Company, shall be prima facie evidence of the fact and extent of the liability of the undersigned to the Company.
- That the Company may decline to become surety on any bond and may cancel or amend any bond without cause and without any liability which might arise therefrom.
- That the Company shall, without notice, have the right to alter the penalty, terms and conditions of any bond issued for undersigned, and this agreement shall apply to any such altered bond,
- That if a contract or performance bond is issued hereunder, the undersigned hereby assign to the Company any monies now due or hereafter becoming due under the contract, including all deferred payments and retained percentage, supplies, tools, plants, equipment and materials due or used on the contract.
- At the Company's discretion, this indemnity agreement shall be governed in all respects by the laws of the State of Michigan and the undersigned applicant and indemnitors consent to the jurisdiction of the courts of the State of Michigan and the United States District Court for the District of Michigan in all actions or proceedings arising from or relating to this indemnity agreement,
- That this indemnity may be cancelled as to subsequent liability by an indemnitor upon written notice to the Company at P.O. Box 30660, Lansing, Michigan 48909, effective ten (10) days after the earliest date hereafter upon which the Company could have cancelled all bonds in force for applicant,
- In the event of any payment by the Company, to pay the Company interest on each amount at the highest legal rate from the date such payments are made.

Applicant **MUST** sign this indemnity agreement

Signed this \_\_\_\_\_ day of \_\_\_\_\_

1. X \_\_\_\_\_

2. X \_\_\_\_\_

3. X \_\_\_\_\_

**Proxy Designation** I designate H.J. Arends, J.W. Fisher and R.L. Looyenga and each of them, attorneys and proxies, with power of substitution and revocation to each, to vote as proxy at all meetings of the Company, and at any and all adjournments thereof. The powers hereunder shall be exercised by a majority of said attorneys and proxies so present, but if only one is present, then that one shall have full power to act.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Applicant)