

# Surety Bond Facility Application

## Information Check List

Please provide:

1. 3 years audited (if applicable) financial statements/annual reports
2. Recent management accounts
3. Recent cash flow projections
4. Corporate brochures, awards and accreditation
5. Organisation chart clearly showing company ownership, management and corporate structure
6. Details of directors and management (including a resume of experience)
7. Schedule of past contracts (largest 10) detailing: client name, description and location of project, final value and date of completion
8. Schedule of current Work In Progress, showing contract value, costs to date, estimated costs to completion and estimate final profit or loss. Please note whether the contract is running on time.
9. Signed statement of assets and liabilities of the shareholders of the business/company (not applicable for public listed entities)
10. Last 2 years Income Tax Returns for all individual shareholders

PLEASE NOTE: Where the applicant forms part of a larger group of companies, consolidated financials for the group and each individual entity are required.

## Applicant Information

<b>Applicant name:</b>			
<b>Company A.C.N &amp; A.B.N:</b>			
<b>Street address:</b>			
<b>Registered office:</b>			
<b>Postal address:</b>			
<b>Contact name:</b>		<b>Title:</b>	
<b>Telephone no.:</b>		<b>Fax no.:</b>	

## Corporate Bankers

<b>Principal bankers:</b>			
<b>Branch address:</b>			
<b>Contact at bank:</b>	Name:	Title:	Phone No.:
<b>No. of years with bank:</b>			

## Current Finance Facilities

Please list all finance facilities in place, regardless of whether drawn. Include contingent liabilities such as surety bonds and bank guarantees. Please attach a signed schedule if insufficient room below.

Type of facility	Lender/Guarantor	Total drawn (\$)	Limit available (\$)	Expiry date
Overdraft				
Loans				
Bank Guarantees				
Other Surety				
Other				

## How are the above facilities secured?


## Claims and litigation disputes

To the best of your knowledge, are there or have there been:

- any material claims, attempted claims or potential claims against an insurer, a guarantor, a financier or any other surety body in relation to either the applicant entity or a related entity of the applicant
- any material industrial or litigious action against the applicant entity or a related entity of the applicant
- a liquidator, a trustee in bankruptcy, a receiver or an external administrator appointed to the applicant entity or a related entity of the applicant

For the above section, 'related entity' is as defined under Section 9 of the Corporations Act 2001 and includes, but is not limited to, directors (and relatives or spouses of the directors) and related bodies corporate. For the above section, 'material' means an amount of more than 1% of the applicant entity's last reported annual turnover.

Yes  No

If you answered yes to any of the above, please attach details

## Key personnel

Name	Position	Years with applicant	Shareholding in company

## Financial Management and Risk Control

	Name	Address	Contact name
<b>Auditors</b>			
<b>Accountants or financial Advisors</b> (if different to above)			

List the applicant entity's current insurance cover.

Policy type	Limit of liability (\$)	Expiry date
Professional Indemnity		
Public Liability		
Directors and Officer Liability		
Other:		
Other:		

## Declaration

The undersigned hereby declares that the information and details provided herein are full and true answers and that it is understood the information provided will be used for the evaluation of this submission by the Surety. Further, the undersigned confirms that he/she is duly authorised to sign this questionnaire for and on behalf of the applicant.

I/we also acknowledge that Brokerage may be payable to a broker in relation to the issuance of this/these Bond/s.

Authorised Signatory: ..... Date: .....

Name: ..... Title: .....

## Broker's Authority to Act

I give permission for IHG Surety & General to act on our behalf to arrange the Surety Bond/Facility on behalf of the applicant and related entities.

Authorised Signatory: ..... Date .....

Name: ..... Title: .....

### AUTHORISATION TO ACCESS CONSUMER CREDIT INFORMATION

This section must be completed by all applicants if application is in personal names

<b>Name:</b>		
<b>Residential Address:</b>		
<b>If above residential address is less than 2 years, please provide previous addresses for the last 5 years:</b>		
<b>Business phone no:</b>	<b>Home phone no:</b>	<b>Mobile</b>
<b>Date of birth:</b>	<b>Driver's licence:</b>	<b>Expiry:</b>
<b>Sex:</b>		

I agree that IHG Surety & General may obtain information about me from a business which provides information about the commercial credit worthiness of persons for the purpose of assessing my application for credit.

I agree that IHG Surety & General may obtain information about me or of companies of which I am either a shareholder/director from a credit reporting agency for the purpose of assessing my application for credit.

<b>Signature:</b>	<b>Date:</b>