Blaisdell Bonding & Insurance Services, Inc. 770 S. Brea Blvd, Suite 205, Brea, CA 92821

Tel: (714) 674-1921 Fax: (714) 672-0625 email: mblaisdell@blaisdellbonding.com

## **BOND REQUEST**

I. Contractor/Principal:			
Address:			
City/State/Zip:			
Telephone:	Fax:	<u> </u>	
Contact Person:	Fed Ex/UPS #:		
What is the total cost to complete of a	all Work on Hand? \$		(IMPORTANT
II. □ BID BOND			III.  FINAL BOND
Date of Bid:			\$
Time of Bid:			<b>Y</b>
Percentage of Bid Bond:			rformance:
Estimated Contract/Bid Price \$	<u> </u>		yment:
Engineer's Estimate \$			y
Project/Solicitation No.:			
Troject Conortation Tvo			d?: □Y □N Negotiated?: □Y □
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		Dia Modallo.	
Please be sure to fax Blai	orm Surety/Generic For sdell either the Notice	<sup>m</sup> <u>to Bidders Page</u>	e, or a copy of the Contract
Project Description:			
Project No.:			
Approx. Start Date:			
Liquidated Damages: ☐YES ☐NO			per
Length of Warranty:		olved: UYES NO	% Subcontracted:
City the work is being done in:			
% Retainage: % Material:	% Labor:	%Profit	:
V. Owner/Obligee:			
Address:			
Contact Person:		ephone:	
		•	
For Blaisdell Use Only:			
<del></del>	Rate:		Bid Bond #
☐Approved ☐Declined	Surety:		
By: Date:	SBA:		Final Bond #
Conditions:			