

WORLD INSURANCE SERVICES, INC.

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CUSTOMS BOND APPLICATION

PRINCIPAL INFORM	MATION									
Name of Company to appear on Bond					TIN/SSN/CBP#	TIN/SSN/CBP#				
Address						Main Phone	Main Phone			
							Fax			
City State						Zip Code	E-Mail	E-Mail		
State of Incorporation		Count	ry of Incorpor	prporation			Number of Years In	Number of Years Incorporated		
OFFICER OF THE C	OMPAN	IY SIGNING BO	ND DOCUM	MENTS						
Name Title										
Type of Company	□Corp	oration Partn	ership □Sole	e Proprietorship DL	LC □Indiv	vidual □Foreign Co	rp □US Gov't □US Stat	e/Local		
Type of Business	□lmpo	orter □Warehou	usemen □T	rucking Common Ca	rrier □Ai	r Carrier □Ocean	Common Carrier ☐ Other	f		
BOND REQUIREM	ENTS									
□ New Bond Application □ Termination & Replacement				Requested Bond Effective Date Click here to enter a date.			Bond Amount Req	Bond Amount Requested		
		IMPORTER of		CUSTODIAN Type '2' CFR 113.63		CARRIER Type 3	FTZ			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		**		ss Enterprise	1,700 1 0111111		Miscellaneous	
□General Goods □TIB □Warehouse □Auto □AD/CVD □FDA □Chapter 98 □GSP/CBI		□ Drawback Payment Refun	ds □Bond □Cont Stati □Bond □List (nder Carrier □'3' AMS nded Warehouse □Instrum ntainer Freight Internat		MS (Freight)	□Foreign Trade Zone 113.73			
HTS - HARMONIZE HTS Prod 1 2 3		IFF SCHEDUL	E NUMBER		n Dollar \		P	roduct	Description	
5 6										
PROJECTED IMPO	ORT DO	LLAR VOLUM	IE							

Bond Amount Calculator Type '1' CFR 113.62		PREVIOUS TWELVE	(12) MONTH	5	ESTIMATED NEXT TWELVE (12) MONTHS				
	FOB VALUE	EST. DUTIES/ TAXES/ FEES	IR TAXES	NO. OF ENTRIES	FOB VALUE	EST. DUTIES/ TAXES/ FEES	IR TAXES	NO. OF ENTRIES	
Estimated Dollar Import Volume									

OWNERSHIP AND STOCKHOLDER INFORMATION

Name First Name	Last Name		Social Security Number	Percent Ownership %
Address	City	State	Zip	Telephone
Marital Status:	Spouse's Full Name: First Name		Last Name	Spouse Social Security #
Number of years you have owned this business years	Number of years' experience years		Fair market value of primary residence \$	Balance of mortgage \$
Name First Name	Last Name		Social Security Number	Percent Ownership %
Address	City	State	Zip	Telephone
Marital Status:	Spouse's Full Name: First Name		Last Name	Spouse Social Security #
Number of years you have owned this business years	Number of years' exp years	perience	Fair market value of primary residence \$	Balance of mortgage \$
Name First Name	Last Name		Social Security Number	Percent Ownership %
Address	City	State	Zip	Telephone
Marital Status:	Spouse's Full Name: First Name		Last Name	Spouse Social Security #
Number of years you have owned this business years Number of years' experience years			Fair market value of primary residence \$	Balance of mortgage \$

QUESTIONS

1.	Has your company imported merchandise subject to an anti-dumping order in the last 5 years? \Box No \Box Yes Explain
2.	Has your company been assessed post entry duty adjustments? ☐ No ☒ Yes Number of bills
	Dollar amount Reason for additional duty bills:
3.	Has your company received U.S. Customs "Notice of Penalty or Liquidated Damages" demands? Number received last year
	Current Year Reason for notices:
4.	Is your company CTPAT Certified?
5.	How does your company file ISF? ☐ Self File ☐ CHB ☐ Freight Forwarder
6.	How does your company pay US Custom duty? ☐ Company Check ☐ Company ACH ☐ CHB ACH
7.	Has application for this bond been declined by another company? ☐ No ☐ Yes If yes, state particulars
	Click here to enter text. Name of prior surety Click here to enter text.
8.	Had any lawsuits or judgments against them? ☐ Yes ☐ No (If any answers are yes, attach detailed statement)
9.	Ever failed in business or declared Bankruptcy? ☐ Yes ☐ No
10.	. Ever been convicted of a felony? ☐ Yes ☐ No
11.	. Ever had their license suspended, revoked or denied? 🔲 Yes 🖂 No
12.	. Ever been a party to a surety bond claim? 🗆 Yes 🗆 No

ACKNOWLEDGEMENT

☐ BY CHECKING, WE ACKNOWLEDGE:

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE, ACCURATE AND BASED ON THE BEST INFORMATION AVAILABLE AS OF THE DATE OF THIS APPLICATION. SHOULD THE PRINCIPAL DISCOVER ANY INACCURACIES IN THE ABOVE INFORMATION, THE PRINCIPAL UNDERSTANDS THAT IT IS ITS DUTY TO ADVISE THE SURETY IMMEDIATELY. THE PRINCIPAL UNDERSTANDS THAT HIIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT TO EXECUTE BONDS OR ANY BOND. THE PRINCIPAL FURTHERMORE UNDERSTANDS THAT ADDITIONAL INFORMATION MAY BE REQUIRED AS PART OF THE UNDERWRITING PROCESS. THE PRINCIPAL UNDERSTANDS THAT APPLICATIONS TO U.S. CUSTOMS AND BORDER PROTECTION ARE SUBJECT TO MANY VARIABLES AND THAT THE SUCCESS OF ANY APPLICATION IS IN NO WAY GUARANTEED. THE PRINCIPAL HEREBY WAIVES ANY CLAIM THAT DELAYS IN COMMUNICATION WITH U.S. CUSTOMS AND BORDER PROTECTION ARE THE FAULT OF THE SURETY. THE PRINCIPAL FURTHERMORE UNDERSTANDS THAT U.S. CUSTOMS AND BORDER PROTECTION MAY PERIODICALLY CHANGE ITS POLICIES AND PROCEDURES, AND HEREBY WAIVES ANY CLAIM THAT ANY FAILURE TO COMPLY WITH ANY SUCH CHANGES IS THE FAULT OF THE SURETY. THE PRINCIPAL HEREBY WAIVES ANY CLAIM THAT ANY NEGATIVE DETERMINATION WITH RESPECT TO THIS APPLICATION BY U.S. CUSTOMS AND BORDER PROTECTION IS THE FAULT OF THE SURETY

Click here to enter text. Company Name

Click here to enter text. **Print Name and Title**

Click here to enter text.

Signature

Date