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General Company Information Form

1. Full Name of Applicant / Company Name:

PLEASE ANSWER ALL QUESTIONS FULLY

Postal Address:	Person to Contact:
	Name:
	Position:
	Phone Number:
Registered Office:	Facsimiles Number:
	Email Address:
	Date of Incorporation:
	Registration Number:
Immediate Holding C	
6	
Ultimate Holding Cor	npany:

2. Business of Applicant (attach brochures if available):

Approximate Number of Permanent Employees:

3. Directors / Partners:

Full Name & Personal Address	Qualifications	Age	% Shareholding / partnership

Please detail ANY changes in the past year:

4. Principle Shareholders not being Directors (I.e. 5% or more of Holdings):

Name:	%
Name:	%
Name:	%
Please detail ANY changes in the past year:	

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5. Bankers:

	(1)	(2)	(3)	
Name:				
Address:				
Person to contact:				
Present facility limits:				
Overdraft:				
Term Loan:				
Guarantees:				
Present current account balances:				
How Secured:				
Please enclose copies of the facility letters.				

6. Please give details of three major contracts / developments undertaken in the recent past which demonstrates the experience of your company:

7. Please enclose the last two years audited accounts and the latest management accounts of your firm, the ultimate holding company and all of all connected firms owned by the same shareholders.

Has there been a change of financial year end since the last audited accounts?

	Yes		l No
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If so, please state new date and why:

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8. Please answer the following by stating whether the applicant:

(a) Has ever had its accounts qualified by its auditors:	Yes	No
(b) Is engaged or involved in any situation which is likely to result in its insolvency or which may cause it to request any postponement of obligations to any party:	Yes	No
(c) Has made known or whether you are aware of any plans for any changes of the present ownership of the Company or any alteration in its business or the disposal of any of its fixed assets:	Yes	No

If the answer to any of the above questions is YES, please give full details below:

9. Previous arrangements with whom have your previous bonds been arranged:

SURETY	TOTAL VALUE OF BONDS ISSUED € NO	CURRENT VALUE OF BONDS STILL IN FORCE NO

10. Has the Applicant or any Director or Senior Manager thereof either personally or in connection with this or any other firm:

(a) ever failed to complete a contract?	Yes	No
(b) ever had a judgement debt registered?	Yes	No
(c) ever been bankrupt or in receivership or in liquidation or in administration?	Yes	No
(d) are there any unresolved or pending legal actions or other disputes in existence?	Yes	No
(e) have any trade accounts been closed for non-compliance with terms?	Yes	No
(f) are there any arrears of more than three months in payment of PAYE / NIC / deduction in payments to Sub-Contractors?	Yes	No
(g) has any Insurance Company or Bank declined to act as Surety on your "behalf"?	Yes	No
If the answer to any of the above questions is YES, please give full details below:		



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11. Declaration:

I declare that the above statements and particulars are true and that to the best of my knowledge I have not withheld any information which could materially affect this application. I authorise underwriters to contact any source to obtain any information it may require and understand that underwriters reserve the right to decline this application without giving a reason.

Signed:

Title/Position:

Date: