



M.J. SCHUETZ INSURANCE SERVICES, INC.

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CONTRACT BOND REQUEST FORM nasbp.org/toolkit

To: SUBMIT TO: BONDS@MJSIS.com Today's Date:

From:

Contractor:

Obligee (Bond Payable To):

Address:

Legal Project Name (including any identifying numbers):

Job Location:

Scope of Work:

Estimated Start Date: Work On Hand As Of: \$

Completion Time: Penalties/Damages: \$

Special Bond Forms? Yes (attach forms) No Retainage: %

Warranty Period: Covered By Manufacturer? Yes No

Job Breakdown: Labor: % or \$ Materials: % or \$

Subcontracts: % or \$ Profit: % or \$

Table with 3 columns: List Major Subcontractors, Amount, Sub Bonded? (Yes/No)

Architect/Engineer Phone:

Special Hazards:

BID BOND INFORMATION

Bid Date and Time: Estimated Bid: \$

Bid Bond Amount: % or \$ Bid Opening Location:

BID RESULTS

Low Bidder: Provide if not previously reported Bid Amount: \$

2nd Bidder: Bid Amount: \$

3rd Bidder: Bid Amount: \$

Do you expect to be awarded the contract? Yes No

Comments:

PERFORMANCE & PAYMENT BOND INFORMATION

Contract Date: Contract Amount: \$

Performance Bond Amt: % Payment Bond Amt: % Number of Executed Sets:

Please include a certificate of insurance with the bond: Yes (attach requirements) No

NOTE: Please attach a copy of the bid specs or contract. Failure may result in the delay of delivery of the bond.

