

Date: _____

AGENCY INFORMATION

Agency Name: Gummerson Bond Group
Contact Name: Gary R. Gummerson Email: Gary@GummersonBonds.com
Phone: (704) 522-6364 Fax: (704) 522-6362

BUSINESS INFORMATION

Company Name: _____ Phone #: _____
Address: _____ City/State/Zip: _____

Bond Information

Type of Bond: _____ Bid Date: _____ Bid Bond % _____ %
Obligee: _____ Contract Amount (Est for Bid): \$ _____
Obligee Address: _____ Performance Bond Amt: \$ _____
City/State/Zip: _____ Payment Bond Amt: \$ _____
Obligee Contact: _____ Phone #: _____ Start Date: _____
Job Description: _____ Completion Date: _____
Liquidated Damages: \$ _____ per day
What % of Work will be Subcontracted: _____ % Maintenance/Warranty Term: _____
What Work will be Sub-Contracted: _____
List the bid results of the three lowest bidders: 1. Name: _____ Amt: \$ _____
2. Name: _____ Amt: \$ _____
3. Name: _____ Amt: \$ _____