



PLATINUM BONDS

Abridge Application		
Agency Name		
Agent Name		
Phone		
Email		
Applicant Info		
Business Name		
Phone		
Date Started	Year of experience	
Street Address		
City	State	Zip
Principal Name & Spouse		
Home Address		
City	State	Zip
Social Security Number		
Date of Birth		
Have you have a surety claim		
Bond Type		
Obligee Name		
Bond Type		
Bond Amount		
Effective Date requested		
I authorize Platinum Insurance and Bonds, Inc. / and the Surety and/or Surety broker of their choice to make inquiries as necessary concerning or pertaining to the Owner(s), applicant(s), and third party indemnitor(s) listed in this application financial standing, credit report, character or manner of meeting obligations to verify the accuracy of the statements made and to determine their credit worthiness. Visit our website for FCRA disclosure. <a href="http://www.platinumbonds.com/index.php/fcra">www.platinumbonds.com/index.php/fcra</a>		
Applicant Signature		

**You Can Learn More About Our Company @ Our Website: [www.PlatinumBonds.com](http://www.PlatinumBonds.com)**

Platinum Bonds Insurance Agency

15615 Alton Parkway, Suite 450  
Irvine CA 92618

Toll Free **Phone** (866) 409-2477  
Toll Free **Fax** (866) 299-6242  
CA License Number 0E75926

Website  
e-Mail:

[www.PlatinumBonds.com](http://www.PlatinumBonds.com)  
CustomerService@PlatinumBonds.com