

# BARRY COUNTY BONDSPERSON APPLICATION

---

Applicant's Name

---

Agency Name

---

Applicant's mailing address for OFFICIAL communications (Street No. and Name)

---

Address Line 2

---

City

---

State

---

Zip Code

---

Phone number(s) UP TO TWO NUMBERS MAY BE LISTED)

---

Email address

---

---

---

Name of 1<sup>st</sup> Insurance Company that insures applicants bonds

---

Name of 2<sup>nd</sup> Insurance Company that insures applicants bonds

---

Address of 1<sup>st</sup> insurance company

---

Address of 1<sup>st</sup> insurance company

---

Address Line 2

---

Address Line 2

---

City, State, Zip

---

City, State, Zip

---

Bond Limit-Insurance Company 1

---

Bond Limit-Insurance Company 2

---

---

## NOTE:

You **MUST** attach the following documents to this application for each agent listed, including yourself:

- Completed Application
- Copy of qualifying power of attorney from the insurance company representing each agent
- Copy of Michigan driver's license

**INCOMPLETE APPLICATIONS, LATE APPLICATIONS  
AND APPLICATIONS MISSING DOCUMENTATION WILL NOT BE CONSIDERED**

---

---

**APPLICATIONS ARE DUE *NO LATER* THAN NOVEMBER 7, 2016 AT 5:00 P.M.  
PLEASE LIST ALL AUTHORIZED AGENTS YOU WISH TO INCLUDE ON NEXT PAGE.**

---

Applicant's Name

---

Applicant's mailing address for OFFICIAL communications (Street No. and Name)

---

Address Line 2

---

City

---

State

---

Zip Code

---

Phone number(s) UP TO TWO NUMBERS MAY BE LISTED)

---

Email address

---

Applicant's Name

---

Applicant's mailing address for OFFICIAL communications (Street No. and Name)

---

Address Line 2

---

City

---

State

---

Zip Code

---

Phone number(s) UP TO TWO NUMBERS MAY BE LISTED)

---

Email address

---

Applicant's Name

---

Applicant's mailing address for OFFICIAL communications (Street No. and Name)

---

Address Line 2

---

City

---

State

---

Zip Code

---

Phone number(s) UP TO TWO NUMBERS MAY BE LISTED)

---

Email address