

**CUSTOMS BOND APPLICATION**

**Trade Risk Guaranty Brokerage Services, LLC/Hudson Insurance Company**

Legal Name of Company (Principal) (List any additional tradenames or divisions that import under applicant's importer number here)			
Mailing Address/P.O. Box#			Importer/IRS #
City	State	Zip	State of Inc
Proprietorship		Partnership	Corporation LLC
Contact Person		Title	
Email	Phone		# of employees

**Nature of Business**    Retailer                  Wholesaler                  Manufacturer                  \_\_\_\_\_

Imported Commodity(s) \_\_\_\_\_

	Estimated Cargo Value Imported	Estimated Duty/Taxes Paid to CBP on Imports	Estimated # of Entries/Yr	Most common U.S. Port(s) of Entry	Most common Country(s) of Origin
Last 12 Months					
Next 12 Months					

**Bond Type:** (Please only check one per application)    Importer(C1)    Drawback(C1a)    Custodian Bonded Merchandise(C2)    International Carrier(C3)    Instruments of Int'l Traffic(C3a)    Foreign Trade Zone(C4)    Airport Security(C11)    Aggregate Reconciliation Rider    Periodic Monthly Payment User    Other \_\_\_\_\_

<b>Bond Term</b>	3 Year	2 Year	1 Year	<b>Bond Amount</b>	<b>Effective Date</b>
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Who is your primary Customs Broker/Freight Forwarder? \_\_\_\_\_  
 What is the name of the Principal's bank? \_\_\_\_\_  
 Estimated year the Principal was established: \_\_\_\_\_  
 Experience importing since (Year): \_\_\_\_\_  
 Principal's estimated net worth:                  Under \$25,000                  \$25,000 to \$99,999                  \$100,000 to \$249,999                  Over \$250,000

1. Has the Principal or any of its officers ever filed any form of bankruptcy?                  No    Yes If yes, attach explanation
2. Has the Principal ever had its importing privileges suspended or revoked?                  No    Yes If yes, attach explanation
3. Has any surety ever canceled the Principal's bond for any reason, or paid bond claims on the Principal's behalf?                  No    Yes If yes, attach explanation
4. Is the Principal required to pay anti-dumping duty or countervailing duty?                  No    Yes If yes, complete EXT/SUS form
5. Is the Principal aware of any pending anti-dumping or countervailing cases involving its imports?                  No    Yes If yes, complete EXT/SUS form
6. Does the Principal import goods subject to FDA or any Other Government Agency regulations?                  No    Yes If yes, please specify agency: \_\_\_\_\_
7. Will this bond ever be used to clear temporary imports?                  No    Yes If yes, how many each year? \_\_\_\_\_

**General Agreement Of Indemnity**

WHEREAS, The Hudson Insurance Company, its heirs and assigns, (hereinafter called the Company), at the special instance and request of the Undersigned and because of the promise of the Undersigned to execute this indemnity agreement, has assumed or may in the future assume suretyship on bonds, or other obligations.

NOW, THEREFORE, in consideration of the Company executing any of said bonds, the Undersigned jointly and severally hereby agrees:

- 1) to pay the usual premiums , including continuations and/or renewals;
- 2) to completely INDEMNIFY the Company from and against any liability, loss, costs, attorney's fees, and expenses whatsoever which the Company shall at any time sustain as surety on any of said bonds, or for the enforcement of this agreement;
- 3) that the Company shall, without notice, have the right to amend the penalty terms and conditions of any bond issued for the Undersigned and this agreement shall apply to any such amended bond;
- 4) that the Company shall have the right to adjust, settle or compromise any claim, demand, suit or judgment upon said bonds and its decision in good faith to make any payment shall be final and conclusive as to the fact and extent of the liability of the Undersigned;
- 5) upon demand by the Company, to deposit funds as soon as the Company has determined that liability exists under any bond written for the Undersigned, regardless of whether a payment has been issued or reserve booked. Payment shall be made by the Undersigned within 15 days.
- 6) the Undersigned hereby expressly authorize the Company, in its discretion, to access their credit reports or records and to make such pertinent inquiries as may be necessary from third party sources.
- 7) this agreement may be terminated as to subsequent liability, upon written notice to the Company and with written confirmation from the Company stating when such termination will take effect.
- 8) this document can be executed separately by the various signatories, and can be executed before, on or after the effective date of this agreement. A facsimile or copy of the executed document shall be as enforceable as if it were the original.

Note: Collateral may be required for certain bonds.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

**Printed Officer Name:** \_\_\_\_\_                  **SIGNATURE OF OFFICER:** \_\_\_\_\_  
**Officer's Title:** \_\_\_\_\_                  **Date:** \_\_\_\_\_

**LIMITED POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS, THAT

\_\_\_\_\_

(Legal name of company)

a \_\_\_\_\_,

(legal designation, i.e. corporation, sole proprietorship, partnership, etc.)

residing at \_\_\_\_\_

(full street address with state and zip code)

and doing business under the laws of the State of \_\_\_\_\_, hereby appoints **Trade Risk Guaranty Brokerage Services, LLC and TBIB LLC** with office at 211 East Main Street, Suite C, Bozeman, MT 59715 as a true and lawful agent and attorney of the principal named above with limited power and authority to obtain information pertaining to current records at the U.S. Customs Service as well as execute the necessary documents required in filing and/or terminating Customs Bonds (CF301) on behalf of the said principal as fully as said principal could do if present and acting, and hereby ratify and confirm all that said agent and attorney shall lawfully do or cause to be done by virtue of these presents.

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
**(Signature of an Officer)**

\_\_\_\_\_  
**(Printed name of Officer above)**

\_\_\_\_\_  
**(Printed title of Officer above)**