

Generic Local License and Permit Bond Application:

This is a generic bond. If a town/city requires their own bond form, provide a copy with the application.

Agency Name: _____ City/Town: _____

Agency Contact: _____ Email: _____

Applicant information:

Principal Name (Business Entity or Individual Name) required to appear on Bond:

Requested Effective Date: _____ Business Structure: _____

DBA Name (if applicable): _____

Full Primary Address: _____

Applicant Email: _____ Applicant Phone Number: _____

Name and Address of Obligee (Town/City where the bond is to be filed):

Principal Licensed as a (Ex. General Contractor): _____

License Classification: _____

Applicant Name: _____ Title: _____
Print Name

Applicant Signature: _____ Date: _____

Completed and return to Judy Carlson at jcarlson@massagent.com.