



# Pension/Profit Sharing Trust (Erisa) Bond Application

<b>APPLICANT INFORMATION</b>	Applicant (Provide Exact Name of Plan)						
Business Address			City		State	Zip	Year Business was Established
Describe the Products or Services of Your Business or Activity			Previous Surety Company			Reason for changing Bonding Company	
<b>BOND INFORMATION</b>	Amount of Bond		Effective Date		Premium Payments <input type="checkbox"/> Three Years in Advance <input type="checkbox"/> Annually		
<b>UNDERWRITING INFORMATION</b>	Total Assets in the Plan (Bond amount should equal 10% of plan assets)						
Does the fiduciary invest any of the trust funds in the employer's business? <input type="checkbox"/> Yes <input type="checkbox"/> No				Are regular outside audits conducted on the plan? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Does plan employ an independent administrator or financial advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No				What percentage of plan's assets are invested in non-qualified investments?			
<b>AGENT/BROKER INFORMATION</b>	Agent/Broker Name Notary Service & Bonding Agency Inc.		Code 06948	Phone No. (248)332-1800	Fax No. (248)334-7600	City Bloomfield Hills	State MI   Zip 48302
<b>AGENT'S RECOMMENDATION</b>				<b>COMMENTS</b>			
<input type="checkbox"/> We are not very familiar with this applicant. <input type="checkbox"/> We are familiar with applicant and are aware of no adverse information about him/her. <input type="checkbox"/> We know applicant very well and offer our highest recommendation.				<hr/> <hr/> <hr/>			



## **Alabama, Arkansas, D.C., Louisiana, Maryland, Rhode Island, West Virginia**

*Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines, or confinement in prison, or any combination thereof.*

## **Colorado**

*It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.*

## **Oklahoma**

*Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony.*

## **Florida**

*Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.*

## **Kentucky, Pennsylvania**

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

## **Tennessee, Virginia, Washington**

*It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines or a denial of insurance benefits.*

## **Maine**

*It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.*

## **New Jersey, New Mexico**

*Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.*

## **New York**

*Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.*

## **Ohio**

*Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a false claim containing a false or deceptive statement is guilty of insurance fraud.*

## **Oregon**

*Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material facts may be violating state law.*

## **Utah**

*Any person who knowingly presents false or fraudulent underwriting information, files or causes to be filed a false or fraudulent claim for disability compensation or medical benefits, or submits a false or fraudulent report or billing for health care fees or other professional services is guilty of a crime and may be subject to fines and confinement in state prison.*