

**Easy Binding Instructions for:**

**ERISA Bond**

*3 year term*

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1. Please complete attached application and **sign as indemnitor**.
2. Return the signed application along with a **Check or Credit Card Authorization for:**
  - Limit **\$10,000 to \$100,000** premium **\$333.00**
  - Limit **\$100,001 to \$200,000** premium **\$383.00**
  - Limit **\$200,001 to \$300,000** premium **\$436.00**
  - Limit **\$300,001 to \$400,000** premium **\$493.00**
  - Limit **\$400,001 to \$500,000** premium **\$563.00**
  - **Over \$500,001 Call for premium**

**Made to the order of:**  
**Bernard Fleischer & Sons, Inc.**  
2 John Street, Suite 201  
New York, NY 10038-2502

Once we receive completed application and check, we will issue the bond.

If you want the original bond mailed overnight please include **\$30.00**

Bonds are not binding until approved by the company.

*Thank you for choosing Bernard Fleischer & Sons, Inc. for your all your bonding needs.*

Richard Blaszczak  
Bond Underwriter  
Extension 110

**Bernard Fleischer & Sons**  
2 John Street, Suite 201 • New York, NY 10038-2502

**Toll Free: (800) 921 1008 • NY: (212) 566 1881 • Fax: (212) 566 1615**

<http://www.bfbond.com> email: [bonds@bfbond.com](mailto:bonds@bfbond.com)

## ERISA Bond

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Plan Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

What is the total fund balance? \_\_\_\_\_

Amount of Bond: Effective Date \_\_\_\_\_

Is this bond required because more than 5% of plan assets are "non-qualifying?" Yes \_\_\_\_\_ No \_\_\_\_\_

### Premium Payment Plan Desired

Annual \_\_\_\_\_ Three years in advance \_\_\_\_\_

Previous Surety: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide name and reason for change: \_\_\_\_\_

Number of Trustees: \_\_\_\_\_

### Information on the plan

Is the plan audited? Yes \_\_\_\_\_ No \_\_\_\_\_ How often? \_\_\_\_\_ By whom? \_\_\_\_\_

Any dishonesty losses related to the plan in the past five years? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes, give specific details on each loss and any changes made to prevent such a reoccurrence on a separate sheet.)

The undersigned agrees the above representations are an accurate statement of current information and procedures. This application, with Bond Declarations and provisions, and endorsements issued to form a part thereof, constitute the entire contract.

(Signature of officer or employer): \_\_\_\_\_

(Official Title): \_\_\_\_\_

### Bernard Fleischer & Sons Inc.

2 John Street, Suite 201 New York, NY 10038-2502

**Phone: (212) 566 1881 - (800) 921 1008**

Email: [bonds@bfbond.com](mailto:bonds@bfbond.com) [www.bfbond.com](http://www.bfbond.com)

Agency Code: 31-18266

Signed this \_\_\_\_\_ day of \_\_\_\_\_

**Note:** Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. *John Doe, Indemnitor*

We have examples showing five ways to sign an application.

**1. Individual or Sole Proprietorship.**

Signed this 22<sup>nd</sup> day of January, 2002

1. X John Doe, Indemnitor

2. X Jane Doe, Indemnitor

3. X \_\_\_\_\_

\_\_\_\_\_

NOTE: Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. John Doe, Indemnitor

The individual or sole owner and spouse should sign at the bottom of the application, writing the word "Indemnitor" in their own handwriting after each of their names.

**2. Partnership.**

Signed this 22<sup>nd</sup> day of January, 2002

1. X John Doe, Indemnitor

2. X James Doe, Indemnitor

3. X Jane Doe, Indemnitor

Ann Doe, Indemnitor

\_\_\_\_\_

NOTE: Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. John Doe, Indemnitor

Each partner and his or her spouse should sign at the bottom of the application, writing the word "Indemnitor" after each of their names.

**3. Corporation.**

Signed this 22<sup>nd</sup> day of January, 2002

1. X DOE CORPORATION, INC

2. X John Doe, President

3. X John Doe, Indemnitor

James Doe, Indemnitor

      \* Jane Doe, Indemnitor

\_\_\_\_\_

NOTE: Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. John Doe, Indemnitor

An officer should first sign on behalf of the corporation (indicating his/her corporate title) and then sign a second time, writing only the word "Indemnitor" after his/her second signature. Any other owners should also sign, writing only the word "Indemnitor" after their names. In most cases, the owners' spouses also need to sign.

\* In most cases, the owners' spouses may also need to sign.

**4. Limited Liability Company or Partnership.**

Signed this 22<sup>nd</sup> day of January, 2002

1. X John Doe, Manager

2. X John Doe, Indemnitor

3. X James Doe, Indemnitor

      \* Jane Doe, Indemnitor

\_\_\_\_\_

NOTE: Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. John Doe, Indemnitor

An authorized manager, member, or partner should first sign on behalf of the Limited Liability Company or Partnership (indicating his/her company/partnership title) and then sign a second time as a personal indemnitor, writing only the word "Indemnitor" after his/her second signature. All other members/owners/partners should also sign as personal indemnitors, writing only the word "Indemnitor" after their names. In most cases the members'/owners'/partners' spouses also need to sign.

\* In most cases, the members'/owners'/partners' spouses may also need to sign.

**5. Outside Indemnity (Relatives, Friends).**

Signed this 22<sup>nd</sup> day of January, 2002

1. X John Doe, Indemnitor

2. X Jane Doe, Indemnitor

3. X John Henry, Indemnitor

Joseph Smith, Indemnitor

\_\_\_\_\_

NOTE: Personal indemnitors should sign their names and add the word "indemnitor" in their own handwriting, e.g. John Doe, Indemnitor

When outside indemnity is required, the proposed indemnitors should sign at the bottom of the application below the applicants' signatures and write the word "Indemnitor" after each of their names.

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

