BOSS bonds
excellence in surety

FREIGHT BROKER BOND APPLICATION (BMC-84)

Date: _____

***Note: All company owners are subject to a soft credit pull.**

AGENT INFORMATION (Required if submitting on behalf of your client)

Agency Name: _____ Contact Name: _____

Address: _____

Phone #: _____ Email: _____

APPLICANT INFORMATION

Company Name: _____ Contact Name: _____

Address: _____

Phone #: _____ Email: _____

Motor Carrier #: _____ DOT #: _____

Years in Business: _____ Past Surety Claims: ◯ Yes ◯ No

OWNER 1 (Any owner with 10% or more ownership must complete)

% Owned: _____ Social Security #: _____ U.S. Citizen? ◯ Yes ◯ No

Owner Name: _____

Address: _____

Do you own real estate? ◯ Yes ◯ No Ever claim bankruptcy? ◯ Yes ◯ No

OWNER 2 (Any owner with 10% or more ownership must complete)

% Owned: _____ Social Security #: _____ U.S. Citizen? ◯ Yes ◯ No

Owner Name: _____

Address: _____

Do you own real estate? ◯ Yes ◯ No Ever claim bankruptcy? ◯ Yes ◯ No

OWNER 3 (Any owner with 10% or more ownership must complete)

% Owned: _____ Social Security #: _____ U.S. Citizen? ◯ Yes ◯ No

Owner Name: _____

Address: _____

Do you own real estate? ◯ Yes ◯ No Ever claim bankruptcy? ◯ Yes ◯ No