

**FORM 6—SURETY AFFIDAVIT (to be completed by bonding company).**

STATE OF NEW JERSEY—DIVISION OF PROPERTY MANAGEMENT AND CONSTRUCTION

\*Please note: Surety Company completing this form must currently be authorized to do business in the State of New Jersey.

<b>TO:</b>	FIRM NAME	
<b>FROM:</b>	SURETY COMPANY NAME	
<b>SUBJECT:</b>	Classification to perform Construction for the State of New Jersey:	

Reserving our rights to practice our normal underwriting functions, we are prepared to provide favorable consideration for the suretyship on behalf of \_\_\_\_\_ covering construction performance and payment bonds for

(Name of Contractor)

construction contracts in the aggregate amount of outstanding contracts during the twenty four (24) month period \_\_\_\_\_.  
(Date)

The applicant firm's bonding capacity is; Aggregate: \$ \_\_\_\_\_

The surety amount indicated is based upon the applicant's  compiled  reviewed  audited financial report for the fiscal period ending \_\_\_\_\_.

Our willingness to extend suretyship will be based on our underwriting of the account at the time the contractor requests approval. We, as surety, will maintain the absolute discretion to issue or withhold bonds as to each project which the contractor may seek to bid.

In writing bonds for the applicant firm, does the surety company rely on the indemnity of any individual(s) or any other firm(s)?

NO  YES If YES, supply names and addresses of others: \_\_\_\_\_

<b>NOTARY PUBLIC</b>
<b>ATTESTED:</b> Sworn and subscribed to before me
on the _____ day of _____
SIGNATURE _____ 20____.
(NOTARY SEAL)

<b>SURETY COMPANY</b>
BY: _____
(Signatory Capacity) _____ (Date) _____
ADDRESS: _____
TELEPHONE NO: _____
<i>(If signed by an individual other than an Authorized Officer, Properly Executed Power of Attorney.)</i>