



# CLIMBS LIFE AND GENERAL INSURANCE COOPERATIVE

A Climate Insurance: Insuring where you are!

## APPLICATION FOR SURETY BOND

NAME OF COOPERATIVE: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
OFFICE TELE/FAX NO: \_\_\_\_\_ MOBILE NO: \_\_\_\_\_  
APPLICATION DATE: \_\_\_\_\_

### LIST OF ACCOUNTABLE OFFICER TO BE COVERED

NAMES	POSITION	AMOUNT OF COVERAGE	AMOUNT OF PREMIUM
TOTAL			

I am agreeable to sign with the applicant/s covering the applied Surety Bond for by him from your Cooperative the amount as applied above. I am aware of my responsibilities which I will assume in signing. That I am also aware that you will rely on the truth of the following statement in consideration thereof. I authorize you to obtain such information as you may require concerning the statements made hereunder and the agree that this document shall remain your property whether or not the bond is granted.

**NOTE: The applicant for the Surety Bond shall not be the co-signer**

Co-signer (1): \_\_\_\_\_ (Pls Print Name Clearly) \_\_\_\_\_ (Signature)

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

Telephone / Cell No: \_\_\_\_\_ Occupations: \_\_\_\_\_

Co-signer (2): \_\_\_\_\_ (Pls Print Name Clearly) \_\_\_\_\_ (Signature)

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

Telephone / Cell No: \_\_\_\_\_ Occupations: \_\_\_\_\_

## SURETY BOND SCHEDULE OF PREMIUM

Amount Of Coverage	Annual Premium	Amount Of Coverage	Annual Premium
-----	-----	100,000.00	1,720.40
10,000.00	495.70	200,000.00	2,109.19
15,000.00	618.80	250,000.00	2,303.60
20,000.00	735.45	300,000.00	2,498.00
25,000.00	845.60	400,000.00	2,886.80
30,000.00	949.28	500,000.00	3,274.38
35,000.00	1,046.50	600,000.00	3,929.25
40,000.00	1,137.20	700,000.00	4,584.13
50,000.00	1,299.20	800,000.00	5,239.00
60,000.00	1,435.30	900,000.00	5,893.88
70,000.00	1,545.45	1,000,000.00	6,548.75
80,000.00	1,629.30	1,500,000.00	9,823.13
90,000.00	1,688.00	2,000,000.00	13,097.50

Please make all checks payable to **CLIMBS Life and General Insurance Cooperative**. You can also pay on-line deposit through **Banco de Oro savings account no: 003160097336** under account name CLIMBS. For Policy issuance please send a copy of the deposit slip together with this application form or text 0917-714-8698.