



Income Tax Preparer Bond Information

Important: You must have an active Bond to be registered with CTEC.

Our affiliate company SAAVEDRA INSURANCE AGENCY (Lic # OE75432) can provide you with the needed Income Tax Prepared Bond.

The bonds prices below are special for **A & B Office** students only and already include a \$25.00 broker fee. Broker fees are non-refundable.

1 Year Tax Preparer Bond: \$ 70.00
2 Year Tax Preparer Bond: \$ 80.00
3 Year Tax Preparer Bond: \$ 95.00
4 Year Tax Preparer Bond: \$105.00

How To Order Your Bond

1. Fill out the application shown in the next page.
2. Pay for the bond. You can do this online or make a check/money order payable to “Saavedra Insurance Agency
3. Mail the bond application to our office:

Saavedra Insurance Agency
Att: Tax Bond Processing
2548 W. 7th Street
Los Angeles, CA 90057
Fax: 310/ 893 6714
Email: student@aboffice.com

Note: Please allow 3-4 business days for processing from the day your application & payment is received in our office. Same day “Fast Service” is also provided when your application and payment is received before 2PM of the same business day.

Yes, I want “Fast Service”, a \$10 additional fee applies. Please fax or email me the bond to:

Fax Number: () _____ Email: _____

Signature: _____ Date: _____

(You can fill out the following application before printing)

SPEEDY APP

TYPE OF BOND	AMOUNT \$	EFFECTIVE DATE	TERM	SOCIAL SECURITY NO.
NAME (MUST BE EXACTLY AS IT IS TO APPEAR ON BOND)		BUSINESS PHONE		BUSINESS FAX
BUSINESS STREET ADDRESS (MUST BE PROVIDED)			CITY	STATE
			ZIP	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC
MAILING ADDRESS			CITY	STATE
			ZIP	TAX ID FOR CORPORATION OR PARTNERSHIP
HOME ADDRESS			NATURE OF APPLICANT'S BUSINESS	
			HOME PHONE	
<u>PROCESS SERVER BOND</u> Bond Amount - \$2,000. 2-Year Term - \$50.00 County of _____		<u>NOTARY BOND</u> Bond Amount - \$15,000. 4-Year Term - \$50.00 Attach Copy of Commission Slip		<u>MOTOR VEHICLE</u> (Defective Title, Foreign Vehicle) Rate 2% of bond amount required. \$100 min. Complete Below. If bond exceeds \$10,000., submit financial statement. BOND AMOUNT \$ _____
<u>INSURANCE BROKER BOND</u> Bond Amount - \$10,000. 2-Year Term - \$100.00 Broker's License _____		<u>TAX PREPARER BOND</u> Bond Amount - \$5,000.00 <input type="checkbox"/> 1-Year Term - \$45.00 <input type="checkbox"/> 2-Year Term - \$55.00 <input type="checkbox"/> 3-Year Term - \$70.00 <input type="checkbox"/> 4-Year Term - \$80.00		_____ VEHICLE MAKE MODEL YEAR CYL _____ BODY TYPE LICENSE MOTOR NO. _____ SERIAL NO.

INDEMNITY AGREEMENT - READ CAREFULLY AND SIGN

IN CONSIDERATION of the execution of such bond, and in compliance with a promise of the undersigned made prior thereto, the undersigned individually hereby agree, for themselves, their personal representatives, successors and assigns, jointly and severally, as follows:

1. To reimburse American Contractors Indemnity Company ("Surety") upon demand for all payments made for and to indemnify Surety from:
 - a) all loss, contingent loss, liability and contingent liability, claim, expense, including attorneys' fees, for which Surety shall become liable or shall become contingently liable by reason of such suretyship, whether or not Surety shall have paid same at the time of demand; and
 - b) to pay Surety an advance premium for the first year or a fractional part thereof and to pay annually thereafter such annual premium for suretyship as is billed until satisfactory evidence of discharge or release of liability shall be furnished to Surety by the obligee.
 - c) Upon written demand, to deposit with the Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety in its absolute discretion determines necessary and the deposit shall be pledged as collateral security on any bond or other bonds the Surety may have issued for the undersigned.
2. Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles, California and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles, California.
3. Surety is authorized to investigate, at any time, the undersigned's credit, employment history, and department of motor vehicle records.

N

Regardless of the date of signature, this indemnity is effective as of the date of execution of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).

Date _____

If Individual - Sign Below	
<input checked="" type="checkbox"/> _____ Signature	<input checked="" type="checkbox"/> _____ Signature - Spouse
Printed Name _____ Soc. Sec. # _____ Driver's Lic. # _____	Printed Name _____ Soc. Sec. # _____ Driver's Lic. # _____

If Partnership - Sign Below
Name of Partnership _____
<input checked="" type="checkbox"/> _____ Signature - Partner & Individually
Printed Name _____ Soc. Sec. # _____ Driver's Lic. # _____
<input checked="" type="checkbox"/> _____ Signature - Partner & Individually
Printed Name _____ Soc. Sec. # _____ Driver's Lic. # _____

If Corporation - Sign Below
Name of Company _____
<input checked="" type="checkbox"/> _____ Signature - President & Individually
Printed Name _____ Soc. Sec. # _____ Driver's Lic. # _____
<input checked="" type="checkbox"/> _____ Signature - Secretary
Printed Name _____

AGENT INFORMATION	
Name _____	Phone (____) _____
Address _____	Fax (____) _____
City, State, Zip _____	HCCS Producer No. _____

To reach the branch closest to you, **CALL 800-787-3896**