

Individual
Partnership
Corporation
Limited Liability Company
Limited Liability Partnership



1353 Palmetto Ave., Suite 100
Winter Park, FL 32789;
Toll Free (888) 848-1787; P: (321) 972- 4863
f: 407.628.1671; e: info@lsjins.com; www.lsjins.com

Probate Bond Only Application (Please Print or Type)

NOTES: Must attach copy of the Court order, List of estate assets, List of heirs, legatees, beneficiaries, wards, etc.

1. Personal Information	Individual's /Principal Name	Relationship to Ward(s)	Social Security #	Date of birth	Married Single
Occupation	Employer and Business address		Business Phone	Estimated Personal net worth: \$	
Spouse's name		Social Security #	Date of Birth		
Residence Address		City	State	Zip	Residence Phone
Are you the Trustee, Trustor or Beneficiary of any Trust? Yes No	Ever Declared Bankruptcy? Yes No	Pending or Prior IRS Liens? Yes No	Any lawsuits Pending Against You? Yes No		Ever Failed in Business? Yes No
What is the individual relationship to Deceased Ward(s)?					
What is the Principal experience in handling fiduciary responsibility?					

2. Bond / Case Information	Type of Bond (attach Bond form)	Effective Date	Amount of Estate \$	Amount of bond \$
IN THE MATTER OF THE ESTATE OF:				
Who IS A	Deceased; Date of Death:			
	Minor; Date of Birth:	Health Status:		
	Incompetent; Date declared:	Health Status:		Age:
Are you replacing a prior fiduciary or another bond?		Yes No	Is there a Will? Yes No	
Bond Filed in:		Court,	County, State of:	
Residence address of the ward:		City	State	Zip
Probable duration of Trust:		Date of Appointment: (If over 6 months explain why delays)		
Is Principal Indebted to the estate or trust? Yes No, If yes Explain ?		Has principal had possession of estate Assets? Yes No, If yes explain?		Has anyone objected to the principal appointment as fiduciary? Yes No
Is the bond required on the demand of an interested person? Yes No, who?				
Are guardianship funds to be used for support of ward? Yes No, Approximately how much per month? \$; Send us court order authorizing expenditures			What is the source of the guardianship funds?	
Will any ongoing business (excluding farms) of the estate be continued by fiduciary?			Yes No, If yes send copy of court order	
Attorney's name:		address	Ph.#:	Will attorney remain involved for the duration of this estate? Yes No
Describe assets of the estate:				
List the heirs of the estate?				

Indemnity & Notes: The undersigned applicant and indemnitor hereby request and apply for a surety bond and authorize LSJ Insurance Agency to submit this application on their behalf for approval and agree to the following: a) Authorize the surety bonding company to verify this information at any time, and obtain additional information from any source including credit report. b) Agree that if the application is approved to properly sign the Company's specific application/Indemnity agreement which becomes an integral part of this application and pay the premium due as a condition to issue the bond. Signed and dated this ____ day of _____, 20____

For the Business

X _____
(Principal's and /or its authorized representative) / (Title)

For the Individual

X _____
Individual Signature

Print company name

Print Individual name