
VEHICLE INDUSTRY BUSINESS LICENSE BOND

Bond Number _____

License Type:

- Wrecker
 Salvage Pool

KNOW ALL MEN BY THESE PRESENTS:

That _____, as principal,
(Individual or Corporate Name and Name Doing Business as)

located in the County of _____, State of Nevada, obligee,

and _____, a corporation organized and existing under and by virtue
(Name of Surety)

of the laws of the State of _____, and authorized to transact a surety business in the State of Nevada, as surety, are held and firmly bound unto the State of Nevada in the penal sum of _____ THOUSAND DOLLARS for the payment of which well and truly to be made we hereby bind ourselves, our respective heirs, administrators, executors, successors and assigns jointly and severally, firmly by these presents:

To be effective on the _____ day of _____, _____

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

WHEREAS, the above-named principal has been licensed to carry on or conduct in this State the business of an automobile wrecker or salvage pool; and

WHEREAS, the above-named surety herein agrees that any person injured by the fraud or fraudulent representation of the automobile wrecker, or salvage pool in violation of any of the provisions of Chapter 487 of the Nevada Revised Statutes or Nevada Administrative Codes may bring action in said injured person's own name against the said surety. This bond is continuous in form and the total aggregate liability of the bond is limited to the payment of the total amount of the bond. In the event of a dispute of a claim by the surety company, application may be made to the Director, Department of Motor Vehicles, for good cause shown. After notice and hearing, the director may authorize payment of funds from here said surety coverage.

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This bond may be canceled by the surety at any time by giving written notice by registered mail of its desire and intention so to do. Said cancellation shall be effective thirty (30) days after the receipt of said notice by the State of Nevada Department of Motor Vehicles, Occupational and Business Licensing Section.

Signed, sealed and dated this _____ day of _____, _____

X _____
(Principal's Signature)

(Principal's Printed Name)

(Surety)

Telephone Number of Surety: (_____) _____

(Mailing Address of Surety Company, Street)

(City, State and Zip Code)

By _____
(Signature, Attorney-In-Fact for Surety)

(Printed Name, Attorney-In-Fact)
(The corporate seal of the Surety Company must be imprinted or affixed to the bond form)
(Surety Seal)

(A Licensed Agent of issuing company must countersign this form.)
Countersigned on behalf of

(Surety)

this _____ day of _____, _____

(Signature, Agent)

(Printed Name, Agent)

(Business Name, Agent)

(Business Address, Agent)

(All signatures must be original. Electronic and/or photocopies will not be accepted. Alterations will void this form.)