



## DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

1110 WEST WASHINGTON, SUITE 100  
PHOENIX, ARIZONA 85007  
(602) 364-1003  
(602) 364-1052 FAX

OFFICE OF ADMINISTRATION \* OFFICE OF MANUFACTURED HOUSING \* OFFICE OF STATE FIRE MARSHAL

### BOND REQUIREMENTS

### COMPLETION INSTRUCTIONS

- A. Pursuant to A.R.S. §41-2179, before granting an original license, the Deputy Director shall require a surety bond or cash deposit on the form provided, which shall be continuous in form. The amount of the bond is determined by the type and scope of the applied for license.
- B. A separate bond or cash deposit is required for each branch location of any licensed manufacturer or installer. Space is provided for such branch location address in the upper right corner of the License Bond Form B&FS OA 107.
1. Installer Branch Location means a separate business location from the licensee's principal place of business where any business that may be conducted at the principal office is transacted.
  2. Manufacturer Branch Location means a separate business location from the licensee's principal place of business where units are manufactured.
- C. Surety (bonding) company to complete License Bond Form B&FS OA 107 as follows:
1. Side one of form:
    - a. Upper right corner indicate bond number. If applicable, show licensee's branch address on lines provided. See Paragraph B. above.
    - b. 1st Line: Name of business exactly as shown on the Application.
    - c. 2nd Line: Licensee's principal physical business address as shown on Application.
    - d. 3rd Line: Indicate license classification, i.e., D-8, I-10C, M-9A, etc., as shown on Application.
    - e. 4th Line: Name of Surety (bonding) Company and Claims Address for Surety Company.
    - f. 5th Line: Amount of bond in words and numerals.
  2. Side two of form:
    - a. Date bonding company signed and sealed the bond.
    - b. Effective date of bond.
    - c. Signatures, left side:  
Full business name of applicant, typewritten or printed.  
**Signature and title of applicant.**  
**Type or print the name, mailing address and telephone number for the purpose of filing claims in this section.**
    - d. Signatures, right side:  
Name of surety typed or printed.  
Signature of person acknowledging for the surety; and,  
Type or print name and title on line below.  
**Surety signature must be notarized.**
- D. **TO AVOID DELAY** or inconvenience, be sure the bond is completed as delineated above. If necessary, the bond will be returned for correction or a rider will be requested to properly complete the bond before issuance of the license.

STATE OF ARIZONA



DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY
OFFICE OF ADMINISTRATION
1110 WEST WASHINGTON, SUITE 100
PHOENIX, AZ 85007-2935
(602) 364-1003

Bond Number \_\_\_\_\_

Branch (of principal) if applicable

Name \_\_\_\_\_

Address \_\_\_\_\_

LICENSE BOND

KNOW ALL MEN BY THESE PRESENTS:

That we \_\_\_\_\_

as Principal, whose physical business address is \_\_\_\_\_

conducting business under the classification of \_\_\_\_\_

and \_\_\_\_\_

a corporation duly authorized and licensed to transact surety business in the State of Arizona, for the purpose of making, guaranteeing or becoming sole surety upon bonds or undertakings required or authorized by the laws of the State of Arizona as surety, are held and firmly bound unto the State of Arizona for the benefit of:

- 1. Any purchaser of a manufactured home, mobile home, factory-built building or subassembly thereof who is damaged by the failure of the Principal to perform a sales or installation agreement or fails to perform repairs under a warranty, as provided by A.R.S. §41-2179.D;
2. The Deputy Director of the Office of Administration, if the Principal owes said Office under the provision of Articles 1,2,3,4, and 5, Chapter 16, Title 41, Arizona Revised Statutes, and the Rules adopted pursuant thereto;

In the sum of: \_\_\_\_\_ (\$ \_\_\_\_\_) lawful money of the United States of America for payment under the terms expressed herein, we bind ourselves, our heirs, executors, successors and assignees, jointly and severally, firmly by these presents.

THE CONDITION OF THE FOREGOING OBLIGATION IS SUCH THAT:

Whereas, the above bounden Principal has made application with the Office of Administration, Department of Fire, Building and Life Safety of the State of Arizona for a license to conduct business under the classification and at the address set forth above and tenders this bond to comply with the provisions of Articles 1,2,3,4, and 5, Chapter 16, Title 41, Arizona Revised Statutes, and the Rules adopted pursuant thereto by the Board of the Office of Manufactured Housing.

The persons claiming against this bond may maintain action at law against the Principal and the Surety and this bond may be sued upon in successive actions until the full amount thereof is exhausted. No suit may be commenced on this bond after the expiration of two years following the commission of the act on which the suit is based except that the time for purposes of the claim for fraud shall be measured as provided in A.R.S. §12-543.

It is further provided that upon any demand or claim against the bond the Surety shall give notice to the Deputy Director by registered mail of any such demand or claim and of any judgment, recovery or settlement made prior to the payment thereof. This bond shall be continuous in form and shall be conditioned that the total aggregate liability of the Surety for all claims shall be limited to the face amount of the bond irrespective of the number of years this bond is in force. If the Surety desires to make payment without awaiting court actions, the amount of this bond shall be reduced to the extent of any payment or payments made by the Surety, in good faith thereunder. Any such payments shall be based on priority of written claims received by the Surety prior to court action.

(OVER)

The liability of the Surety may be terminated and this bond cancelled as to future liability by the giving of written notice by the Surety to the Deputy Director, of the Surety's desire to terminate liability and by stating in such notice the effective date of such termination, which shall not be less that thirty (30) days from the receipt of such notice by the Deputy Director.

Previous locations are automatically covered by the existing bond when a rider or endorsement is received by the Department indicating a new location.

Nothing in this bond shall be construed to be in conflict with the provisions of Articles 1,2,3,4, and 5, Chapter 16, Title 41, of the Arizona Revised Statutes.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

This bond becomes effective on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Type or Print Licensed Business Name

\_\_\_\_\_  
(Name of Principal)

\_\_\_\_\_  
(Name of Surety)

By: \_\_\_\_\_  
(Signature & Title of Principal)

By: \_\_\_\_\_  
(Signature of Person Signing for Surety)

\_\_\_\_\_  
Agent (Type or Print Name)

By: \_\_\_\_\_  
(Type Name & Title of Person Signing for Surety)

\_\_\_\_\_  
Representing (Name of Company)

This instrument was acknowledged  
before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Telephone Number (including Area Code)

\_\_\_\_\_  
(Notary Public Signature)

\_\_\_\_\_  
Mailing Address

My commission Expires: \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip)

STATE OF \_\_\_\_\_

**NOTE: Provide address and phone number where claims against this bond are to be sent in the spaces appropriated above for insurance agent if bond is not being countersigned by insurance/surety agent.**

COUNTY OF \_\_\_\_\_

**SIGNATURE OF SURETY MUST BE NOTARIZED**

**NOTE**

In cases where a minor discrepancy exists between the information contained on the license application and that contained on the bond, the clarification notice below will be filled in to reflect the proper information. A copy of the bond form with the completed clarification notice will then be sent to the surety. If written notice from the surety is not received by the Office of Administration contradicting the information contained in the clarification notice, it will be assumed that such information is correct. This procedure will eliminate the delays caused by bond rider requests when minor differences exist.

**DO NOT WRITE BELOW  
LICENSEE'S BOND CLARIFICATION NOTICE**

The Office of Administration's records indicate that the correct business name, license classification and/or form of business for the Licensee covered by this surety bond is as stated below.  
Business Name \_\_\_\_\_  
Classification \_\_\_\_\_  
Form of Business: Individual  Partnership  Corporation  Limited Liability Co.   
Other \_\_\_\_\_  
I certify that on \_\_\_\_\_ a copy of this notice was mailed postage prepaid to:  
Date  
\_\_\_\_\_  
Surety's Name By \_\_\_\_\_  
Signature of Licensing Clerk