



## Florida Agricultural Products Dealer Bond Application

Name: \_\_\_\_\_

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

Company Name (if qualifying a Company): \_\_\_\_\_

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

Phone #: \_\_\_\_\_

SS#: \_\_\_\_\_

Amount of Bond: \$ \_\_\_\_\_ Effective Date: \_\_\_\_\_

Bond Limits Over \$25000 Require Personal & Company Financial Statement.

The surety underwrites this bond based on credit. By signing below, you grant the surety company permission to verify credit score. If you have credit issues, call the office so we can discuss different options:

Signature: \_\_\_\_\_

Fax (239 791 1074) or scan and email this to [msmith@flsuretybonds.com](mailto:msmith@flsuretybonds.com) for immediate attention. Bond will be produced on the Department of Agriculture and Consumer Services agriculture bond form and can be sent via overnight courier to you. Thank you for the opportunity.

Smith Insurance & Bonds  
10501 Six Mile Cypress Pkwy Suite #110  
Fort Myers, FL 33966

P. 239.243.9739 F. 239.791.1074 [www.flsuretybonds.com](http://www.flsuretybonds.com)

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