

1625 PRINCE STREET, SUITE 200
ALEXANDRIA, VIRGINIA 22314
PHONE: 703/299-5700 FAX: 703/836-0123
E-MAIL: INFO@TIANET.ORG
WEBSITE: WWW.TIANET.ORG



Trust Agreement Application

(Application fee must be submitted with the application in order to be processed.)

TIA Surety (TIA Member)

AMTEX (Non TIA Member)

BUSINESS NAME: _____ DATE ESTABLISHED: _____
ADDRESS: _____
CITY/STATE/ZIP: _____ COUNTRY: _____
TELEPHONE: _____ TOLL-FREE: _____
FAX: _____ E-MAIL: _____
FEDERAL TAX I.D. #: _____ SOCIAL SECURITY #: _____
MC #: _____

CURRENT SURETY BOND SOURCE:

INSURER'S NAMES: _____ AMOUNT: _____
AGENT'S NAME: _____ EXPIRATION DATE: _____
ADDRESS: _____
CITY/STATE/ZIP: _____ COUNTRY: _____
TELEPHONE: _____ TOLL-FREE: _____
FAX: _____

TYPE OF BUSINESS:

CORPORATION () PARTNERSHIP () PROPRIETORSHIP ()
(if corporation, attach copy of articles of incorporation)
(if partnership, attach copy of partnership agreement)
(if proprietorship, attach copy of county/state DBA or fictitious name filing)

OTHER LOCATIONS, IF ANY: _____

PREVIOUS BUSINESS NAMES USED OVER THE PAST FIVE (5) YEARS AND CITY/STATE WHERE LOCATED: _____

OWNER(S)/OFFICERS (please print clearly)

NAME/TITLE: _____
RESIDENCE: _____
CITY/STATE/ZIP: _____
DRIVERS LICENSE #: _____
ISSUING STATE: _____
SOCIAL SECURITY #: _____
DATE OF BIRTH: _____

NAME/TITLE: _____
RESIDENCE: _____
CITY/STATE/ZIP: _____
DRIVERS LICENSE #: _____
ISSUING STATE: _____
SOCIAL SECURITY #: _____
DATE OF BIRTH: _____

CURRENT DEPOSITORY REFERENCE:

BANK NAME: _____ ACCOUNT NUMBER: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
TELEPHONE: _____

PROPOSED INSTITUTIONAL LETTER OF CREDIT SOURCE:

INSTITUTION NAME: _____ ACCOUNT NUMBER: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
TELEPHONE: _____ CONTACT: _____

ACCOUNTANT

NAME: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 TELEPHONE: _____

ATTORNEY

NAME: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 TELEPHONE: _____

LIST FIVE REFERENCES IN THE TRANSPORTATION INDUSTRY (PREFERABLY SHIPPERS AND CARRIERS) THAT HAVE KNOWN YOU FOR THE PAST THREE YEARS:

NAME	ADDRESS	TELEPHONE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

WHO REFERRED YOU TO TIA Surety/AMTEX? _____

FINANCIAL STATEMENT as of _____

<u>ASSETS</u>		<u>LIABILITIES</u>	
Cash in Bank - (List Banks)		Accounts Payable	
Stocks & Bonds - Describe		Taxes Due	
Notes Receivable - Describe		Taxes Due & Accrued - Other	
Merchandise of Material in Stock		Notes Payable to Bank	
Accounts receivable		Notes Payable to Others - Describe	
Real Estate, Homestead, A		Mortgage on Real Estate A	
Real Estate, Investments, B		Mortgage on Real Estate B	
Furniture & Fixtures		Other Liabilities - Describe	
Other Assets - Describe			
TOTAL ASSETS		TOTAL LIABILITIES	
		Capital Stock (Paid In)	
		NET WORTH ON SURPLUS	
		TOTAL LIABILITIES & NET WORTH	

The undersigned applicant ("Indemnitor" or "Applicant") hereby requests TIA Services Corp. ("TIA SURETY") to become its Administrator for the above Trust, and authorizes TIA SURETY to act as Applicant's attorney-in-fact, in Applicant's name, place and stead, for all purposes in connection with the handling of Applicant's Trust affairs with Trustee.

Applicant is submitting a non-refundable application fee herewith, to be applied to the expense of processing the application. Applicant acknowledges that the fee will not be returned or otherwise credited to the applicant, whether or not the application is approved.

Upon approval of an Applicant's qualification to participate and verification of Applicant's compliance with other Trust conditions, the Administrator may request additional fees.

The Applicant hereby certifies to the truth of all statements made in this application, authorizes TIA SURETY to verify this information, obtain additional information from any source at its own discretion.

As a material condition for acceptance of Applicant's application and TIA SURETY's agreement to act as Trust Administrator, Applicant agrees to execute and return to TIA SURETY the Agreement, and to be bound by and comply with all terms and conditions applicable to Broker set forth therein, which terms and conditions are hereby incorporated into this Application by reference.

Signed this _____ day of _____, 20____ Signature: "Applicant" _____