

Guarantee Application Form (Statement of Needs)

APPLICANT COMPANY DETAILS:

Full Name:	
Trading Address:	
Registered Address:	
Tel:	Fax:
Contact Name	Mobile:
Website:	Email:
Holding or Group/Parent Company:	
Address:	

DIRECTORS/PARTNERS:

Full Name:	Full Name:
Home Address:	Home Address:
Title/Position:	Title/Position:
Full Name:	Full Name:
Home Address:	Home Address:
Title/Position:	Title/Position:

HISTORY/BACKGROUND:

Formation Date:	Company No:
Accountants:	
Solicitors:	
Bankers:	

CONTRACT DETAILS:

Name and Address of your Supplier/s:

Description and Location of Services

Facility/Amount: £

Payment Frequency:

Date of Expiry:

DISCLOSURE:

Has the applicant, any of its Directors or Partners ever required a Surety to make a payment under a Bond or Guarantee?

Yes: No:

Been Bankrupt or entered into an arrangement with creditors whether voluntary or not, or been a Director or Partner of a firm or company to which a receiver or liquidator has been appointed?

Yes: No:

Has your company ever had any County Court Judgements or adjudications awarded against it?

Yes: No:

If you answer **YES** to any of the above please provide details including dates, values, reasons and outcome on a separate page.

Yes: No:

IMPORTANT:

I/we declare that the above statement of needs are true and complete and that I/we have not concealed any material information fact or circumstance whether requested or not that could effect a decision or conditions applying to any decision.

N.B. Contract documents including conditions, bills of quantity, liquidated damages, specimen bond wording and most recent audited accounts should accompany this application.

Signed:

Title/Position:

Date: