
**Surety
Bond**
APPLICATION FORM

libertyspecialtymarkets.com.au



Liberty
Specialty Markets

1. APPLICANT INFORMATION

Name of applicant company

ACN

Applicant company's address

2. BENEFICIARY INFORMATION

Full name of beneficiary

ACN

Beneficiary's address

Type of undertaking: Surety Bond		Bank Fronted						
Bond type	Bond currency	Bond value	Effective date	Release date	Fixed expiry		Bank fronted	
					Yes	No	Yes	No
Performance								
Maintenance								
Retention								
Advance payment								
Offsite materials								
Lease bond								

3. CONTRACT DETAILS

Project description and address

Contract value

Retentions

LD's/other penalties

Commencement date

Date of substantial completion

Maintenance period		
Form of contract		
Percentage of total work to be subcontracted		
Has the client previously undertaken work for the principal/beneficiary?	Yes	No
Has the client previously undertaken a contract of this type?	Yes	No
Has the company undertaken previous contracts for this client?	Yes	No
Has the company undertaken a contract of this type before?	Yes	No
Will the role be that of Head or Subcontractor?		
Percentage to be contracted		
Has the bond wording been specified? (If yes, please provide a copy of the proposed bond wording)	Yes	No
Form of contract ie. (AS2124, JCC, NZIA, NZS3910, other)		
Are force majeure risks excluded risks under contract?	Yes	No
Are there any cross-security clause/s with any other contract/s in this contract?	Yes	No
Are nuclear risks excluded risks under the contract?	Yes	No

4. BOND DELIVERY DETAILS (TO BE DELIVERED TO)

Name

Address

Contact number

5. DECLARATION

The undersigned hereby declares that the information and details provided herein are complete and accurate and it is acknowledged the information herein will be used by Liberty Specialty Markets (a trading name of Liberty Mutual Insurance Company, Australia Branch ABN 61 086 083 605) in making a decision as to whether this application is approved. Further the undersigned confirms that he/she is duly authorised to sign this application form for and on behalf of the applicant company.

Signature

Date

Name of authorised representative (print)

Date

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