Commonwealth of Pennsylvania PENNSYLVANIA DEPARTMENT OF REVENUE

BOND FORM FOR BROKER REGISTRATIONS

Know all men by these presents, that	(Name of Indi	vidual applying for Registration)
Of	(Address, City, State, Zip) here	einafter referred to as the principal,
and (Bonding Co.	- Surety), a corporation organiz	ed and existing under the laws of
the State of and authorized to do but have districted for the state of Paragraphy and authorized to do but have districted for the state of Paragraphy and authorized to do but have districted for the state of paragraphy and authorized to do but have districted for the state of		
bound unto <u>Commonwealth of Pennsylvania – Pennsylv</u>		
we bind ourselves, our executors, administrators, succes		
we blid ourserves, our executors, administrators, succes	sors and assigns, infinity by these	presents.
The condition of this obligation is such, that whereas, the	e principal has made application	for a registration to the obligee for
the purpose of, or to exercise the vocation of a Broker,		
<u>Code of 1971.</u>		
This beautiful be a sufficient to the field for the sufficient to		-1-12
This bond shall be conditioned upon the faithful perf A.1 of the Tax Reform Code of 1971, 72 P.S. §§ 8701-		
Administration), as well as the statutory provisions o		
and regulations promulgated thereunder.	the relevant the credit of the	benefit and the applicable rules
Now, therefore, if the principal shall faithfully comply w		
be in force concerning said registration, and shall save a		
sustain or for which it may become liable on account of t		the principal, then this obligation
shall be void; otherwise, to remain in full force and effect	ct.	
This bond will expire on	(DATE) but may be continued	hy continuation certificate signed
by principal and surety. The surety may at any time ter	(DATE), but may be continued rminate its liability by giving this	rty (30) days written notice to the
obligee, and the surety shall not be liable for any defaul		
prior thereto.	it after such timity day notice per	rod, except for defaults occurring
•		
Signed, Sealed and Dated this day of		_·
Princi	pal:	
By:	_By:	
Name:	Name:	
Tune.		
Title:		
Des Proc Commence		
Bonding Company: EIN NUMBER (Federal ID Number) =	Surety:	
EIN NOMBER (rederal ib Number) =	Surety.	
By:	By:	
Name:	Name:	
	_	
Qualified Pennsylvania Resident Agent (if required)	Title (Attach Attorney)	In Fact if required)
This hand form is approved as to form and locality by		
This bond form is approved as to form and legality by:		
Office of Economic Development on	_(Date) by	(Director)
Department of Revenue on	(Date) by	(Chief Counsel)

COMMONWEALTH OF PENNSYLVANIA PENNSYLVANIA DEPARTMENT OF REVENUE

<u>Instructions for Bond Form – Broker Registration</u>

The Corporate Surety, if signing by an Attorney In Fact, shall attach to the bond a Power of Attorney bearing a certification date **the same as**, or subsequent to, the **date of the Bond**. Out-of-state corporate sureties signed outside of the Commonwealth of Pennsylvania shall have said bond countersigned by a Qualified Pennsylvania Resident Agent.

** BOND MUST BE ON I	FILE WITH THE DEPARTM	ENT BEFORE REGISTRATION	IS VALID **
Name of Individual apply	ing for Registration:		
Address:			
City:	State:	Zip Code:	
Amount <u>\$ 50,000.00</u>			
Expiration Date:			