



Application for Probate Bond
(e.g., Administrator, Executor,
Guardian, Conservator Bond)

Allied Property & Casualty Insurance Company
AMCO Insurance Company
Depositors Insurance Company
Farmland Mutual Insurance Company
Nationwide Agribusiness Insurance Company
Nationwide Insurance Company of America
Nationwide Mutual Insurance Company
1100 Locust St., Dept 2006
Des Moines, IA 50391-2006

AGENCY CODE \_\_\_\_\_

AGENCY \_\_\_\_\_ ADDRESS \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_ S.S. # \_\_\_\_\_

Amount of Bond \$ \_\_\_\_\_ Date of Appointment \_\_\_\_\_

Type of Bond [ ] Administrator; [ ] Executor; [ ] Guardian; [ ] Other (describe) \_\_\_\_\_

Bond will be filed in \_\_\_\_\_ Court of \_\_\_\_\_ County, State of \_\_\_\_\_

Name and Address of Attorney \_\_\_\_\_

Telephone # ( \_\_\_\_\_ ) ( \_\_\_\_\_ )

Name of [ ] Deceased \_\_\_\_\_ Date of Death \_\_\_\_\_

[ ] Minor(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

[ ] Incompetent \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's relationship to Deceased or Ward \_\_\_\_\_

What is the value of the estate? Cash \$ \_\_\_\_\_ Securities \$ \_\_\_\_\_ Real Estate \$ \_\_\_\_\_

Miscellaneous Assets \$ \_\_\_\_\_ Describe \_\_\_\_\_

What are the total debts of the estate? \$ \_\_\_\_\_

If required, would you agree to joint control of all cash and securities belonging to the estate? \_\_\_\_\_

What is the amount of your assets? \$ \_\_\_\_\_ Your liabilities \$ \_\_\_\_\_

What is your annual income? \_\_\_\_\_ If this is a decedant estate, are you an heir? \_\_\_\_\_ If Yes,

what is the amount of your inheritance? \_\_\_\_\_

I have been fully advised of my responsibilities, by my attorney, for the fiduciary position I am assuming and fully understand my legal responsibilities for safekeeping of assets, records to be maintained, reports to be filed with the court and the continuing nature of my obligation and that failure to comply with the requirements can result in personal liability to me.

[ ] Yes [ ] No (If NO, submit to Company.)

IF ANY OF THE FOLLOWING QUESTIONS MARKED WITH AN \* IS ANSWERED YES, CONTACT THE COMPANY. DO NOT ISSUE BOND.

\* Have you given bond in this estate before? \_\_\_\_\_ \*Is there a going business (including farming) in the estate? \_\_\_\_\_

\* Have you heretofore had possession of any of the assets of the estate? \_\_\_\_\_

\* Are you indebted to the estate? \_\_\_\_\_ If Yes, in what amount? \_\_\_\_\_

\* Is this bond being requested as a result of suit, legal proceedings or a claim being brought for the recovery of personal injury claims or wrongful death claim? \_\_\_\_\_

\* Is this bond being required as a result of the demand of an interested party? \_\_\_\_\_ If Yes, who? \_\_\_\_\_

\* Is the applicant a parent acting as a fiduciary for their minor child or children? \_\_\_\_\_

In consideration of the execution by ALLIED PROPERTY & CASUALTY INSURANCE COMPANY, and/or AMCO INSURANCE COMPANY, and/or DEPOSITORS INSURANCE COMPANY, and/or FARMLAND MUTUAL INSURANCE COMPANY, and/or NATIONWIDE AGRIBUSINESS INSURANCE COMPANY, and/or NATIONWIDE INSURANCE COMPANY OF AMERICA, and/or NATIONWIDE MUTUAL INSURANCE COMPANY, Des Moines, Iowa (hereinafter called "the Company") of the bond herein applied for, I hereby agree:

- 1. To pay to the Company the premium for the bond in accordance with the rates filed by the Company in the State where the bond shall be filed and further agree to pay annually in advance thereafter the annual renewal charges which are due and to continue to pay such renewal premium charges which shall be due until satisfactory evidence of the release of the Company from all liability under the bond shall have been furnished to the Company, it being understood the usual evidence required is a release from the court signed by the presiding judge specifically releasing the surety from further liability.
2. To indemnify the Company against all loss, liability, costs, damages, attorneys fees and expenses whatever, which the Company may sustain or incur by reason or in consequence of having executed said bond and in enforcing any of the agreements herein contained.
3. The Company shall have the right, and is hereby authorized but not required, to adjust, settle, or compromise any claim, demand, suit, or judgment upon said bond unless I shall request the Company to litigate such claim or demand or defend such suit or to appeal from such judgment, and if I make such request I shall deposit with the Company collateral satisfactory to it in kind and amount.
4. The Company shall have the absolute right to procure its release from said bond under any law for the release of sureties, and the Company is hereby released of and from any damages that may be sustained by me by reason of such release.
5. At any time, and until such time as the liability of the Company is terminated, the Company shall have the right to reasonable access to books, records, and accounts of the applicant and estate and any bank depository, or other person, firm, or corporation is hereby authorized to furnish the Company any information requested.
6. The above agreements shall bind me and my heirs, executors, administrators, successors and assigns, jointly and severally.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

DISCLOSURE TO APPLICANT given pursuant to the Fair Credit Reporting Act. You are hereby notified that an investigative consumer report, including information as to character, general reputation, personal characteristics and mode of living, MAY be obtained by the Company. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

Applicant

Applicant