



SURETY AGREEMENT

PROCESSING FEE: \$100.00 – Due at time of submittal

GENERAL INFORMATION:

DATE: _____ **PROJECT #:** _____

PROPOSED COMPLETION DATE: _____

DESCRIPTION (Undersigned applicant agrees with Ada County Development Services Department to complete all improvements as shown on approved plan, plat or other approval described below):

REQUIRED SUBMITTAL ITEMS: (Application must include all the following information to be accepted)

ITEMIZED BID. A contractor's itemized bid to complete all required improvements. Each itemized bid shall include the following information.

- Signed and dated by the contractor.
- Bid shall state that it will be honored for **90 days beyond completion date** listed in this Agreement

SURETY. Surety shall include the following information:

- Shall be equal to **120% of the cost** of completing all required improvements.
- Shall remain in effect for **90 days beyond the completion date** listed in this Agreement.
- Surety shall be drawn **solely in favor of, and payable to, the order of Ada County.**
- Total Surety Amount (Equal to 120%):** _____

SURETY TYPE: (check one)

- Irrevocable Letter of Credit
- Performance Bond
- Cashier's Check
- Cash

CONTRACTOR INFORMATION: (Please use separate page to list additional contractors)

CONTRACTOR #1:

NAME: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL: _____ **BID AMOUNT:** \$ _____

CONTRACTOR #2:

NAME: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL: _____ **BID AMOUNT:** \$ _____

The undersigned applicant agrees that all improvements shall be completed on or before: _____

The undersigned applicant agrees that in case improvements are not completed by date specified, Development Services Department may order the work completed by contractor listed on this agreement and pay for the work with the proceeds of surety. In the event the contractor listed on this Agreement cannot perform the work, Development Services Department may select a contractor of its choice, order the work performed, and pay for the work with the proceeds of the surety.

_____ **APPLICANT SIGNATURE** _____ **DATE:** _____

NAME, ADDRESS & PHONE NUMBER OF PERSON TO WHOM THE SURETY IS TO BE RETURNED:

NAME: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

OFFICE USE ONLY

RECEIVED BY: _____ **DATE:** _____ **SURETY EXPIRATION ENTERED INTO DAPS:**