



## Continuous Bond Application

Company Information			
Company Name		Employer Identification Number	
Address			
City		State	Zip Code
Business Type <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC		Number of Years in Business	State of Incorporation (if applicable)
Contact Name		Telephone Number	
Email Address			
Bond Details			
Bond Amount Requested <input type="checkbox"/> \$50,000 Customs Import Bond		Effective Date Requested	
Is there an active bond on file? (If yes, please attach a copy of the bond to this application) <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, has termination notice been sent? <input type="checkbox"/> Yes <input type="checkbox"/> No   Termination Date	
Merchandise Information			
Description of Merchandise		Country(ies) of Origin	
<b>Previous 12 Month Actual Spend</b> Value of Merchandise: Number of Entries: Duties, Taxes and Fees Paid:		<b>Estimated Spent for Next 12 Month Period</b> Value of Merchandise: Number of Entries: Est. Duties, Taxes and Fees:	

### Certification

I certify that the information contained in these applications is true and accurate and that any estimated information provided is based upon the best information available as of the date of this application.

\_\_\_\_\_  
Signature of Corporate Officer

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title