12-FL-292.4eW - October 2011

Net Worth Statement

For personal and/or new business information

Available in fillable PDF form

1. General information									
Name					Date of bir	th	_ /	/	YY
Address			P	ostal Code		IVIIVI			
Marital Status	Spo	use's N	ame					_	
2. Balance sheet as at _									
ASSETS				LIABILITIES					
Cash and term deposits	\$				edit Institution Loans	;	\$		
Accounts and notes receival	·			Credit cards					
Inventory				Accounts Payable/	Unpaid Bills				
Other					· · Credit Institutions Lo	ans			
Investments (complete No. 2				Mortgage loans					
Fixed assets:				Financial Institu	ition:				
Real Estate (complete No.	2R)			Name			_		
Other				Address			_		
Other assets							_		
Other assets				Other loans and no	otes payable				
	_			Other liabilities					
TOTAL ASSETS \$ $\frac{0}{}$				-	TOTAL	LIABILITIES	s \$		
	NET WOR	TH TO	TAL ASSE	ETS – TOTAL LIABILITIE	_{S\$} 0				
2A. Investments (Stock.	Bonds and Mutual Funds)								
Name of Security				Number of Shares		Market Value			
2B. Detail of Real Estate	(Please attach copy of property as	ssessmei	nt)						
Owners Address				Year Purchased	Purchased Price	Municip Assessm		Mortg Balar	
3. Additional information	n								
What is your Total Annual Pe	ersonal Income from all sources?	\$							
		Yes	No					Yes	No
Are you involved in more than one line of business?				Has there ever b	been any judgment o	r action agai	inst you?		
Have you, or has a company which you fully or partially own		_	_	Do you have an	y unpaid taxes from p	revious yea	rs?		
or owned, ever failed in busi									
Are you a guarantor for a thi		Ш							
If yes, provide details on a se									
of this statement. Authority is her	ovided herein to be true and correct an eby granted to any individual, firm or or pertaining to the Undersigned's fina	corporat	ion, and a	ny financial institution to fu	urnish Intact Insurance Co	•	-		
	rmation in this document and by other ormation and claims history. I authoriz		-		•	•		-	
broker's or Surety's policy regardi	ng personal information, for the purpo nd analyzing business results. I confir	oses of co	mmunicat	ting with me, assessing my	application for surety and	underwriting	my bonds,	evaluating	g claims,
Signature				Date					
Intact Insurance Company	Telephone	Fax					•		- -
calgary.surety@intact.net edmonton.surety@intact.net vancouver.surety@intact.net winnipeg.surety@intact.net	1 800 661 2958 780 1 888 669 0595 604	263 819 409 420 669 164 942 663)2 46			L	inta Insur	act	