

**U.S. SMALL BUSINESS ADMINISTRATION
 SURETY BOND GUARANTEE UNDERWRITING REVIEW**

SURETY COMPANY		CONTRACTORS BUSINESS NAME & ADDRESS (Inc. County & Zip)			
AGENCY / BRANCH OFFICE NAME			SBG NUMBER		
PART 1: CONTRACTOR BUSINESS INFORMATION (COMPLETED WITH INITIAL APPLICATION AND ANNUALLY)					
TYPE OF BUSINESS			NAICS CODE		
TYPE OF CONTRACTUAL WORK THIS FIRM HAS DONE PREVIOUSLY					
LARGEST PREVIOUS CONTRACT SUCCESSFULLY UNDERTAKEN? \$	LARGEST PREVIOUS WORK PROGRAM SUCCESSFULLY UNDERTAKEN? \$	# OF JOBS	ANY DISPUTES/DEFAULTS? If "Yes" Include YES NO comments	CURRENT PROJECTS ON SCHEDULE? If "No" Include YES NO comments	
CONTRACTOR EVER FAILED TO COMPLETE JOB? YES NO IF "YES" INCLUDE COMMENTS			HAS CONTRACTOR EVER DEFAULTED ON A CONTRACT FORCING A SURETY TO SUFFER A LOSS? YES NO IF "YES" INCLUDE COMMENTS		
CONTRACTOR HAVE ADEQUATE EQUIPMENT? YES NO					
CONTRACTOR TAXES CURRENT? YES NO IF "NO" INCLUDE COMMENTS		CONTRACTOR INSURANCE COVERAGE SUFFICIENT? YES NO		CONTRACTOR PREVIOUSLY BONDED? YES NO	
LARGEST CONTRACT AMOUNT BONDED AND SUCCESSFULLY COMPLETED? \$			WITH WHAT SURETY/SURETIES?		
HISTORY OF AND REASONS FOR SURETY CHANGES?					
CONTINUATION SHEETS PROVIDED? YES NO		RESUME(S) OF OFFICERS, OWNERS AND/OR KEY EMPLOYEES ON FILE? YES NO			
CONTRACTOR'S QUESTIONNAIRE ON FILE? YES NO			BUSINESS PLAN ON FILE? YES NO		
INDEMNITIES POSTED? (Company & Personal) YES NO		IF "NO" INCLUDE COMMENTS		IF "YES" ATTACH COPIES OF INDEMNITY AGREEMENTS AND PERSONAL FINANCIAL STATEMENTS ON ALL INDEMNITORS (Including those of third parties unless previously submitted to SBA)	
DOES SURETY RECOMMEND FINANCIAL / MANAGEMENT / TECHNICAL ASSISTANCE BY SBA? YES NO IF YES, WHAT TYPE & WHY?					
PART 2: CONTRACTOR FINANCIAL INFORMATION AND WORK IN PROCESS (Completed with initial application and as required by SBA)					
CURRENT COMPANY FINANCIAL STATEMENT ON FILE? YES NO			CURRENT PERSONAL FINANCIAL STATEMENT ON FILE? YES NO		
DATE OF FINANCIAL STATEMENTS		FISCAL YEAR ENDS	FINANCIAL STATEMENT PREPARED BY WHOM?		
F/S SHOW DISCLAIMER? YES NO		TYPE OF FINANCIAL STATEMENT CASH SAMPLE ACCRUAL % OF COMPLETION OTHER (Specify)			
NET WORTH \$ COMPANY \$ PERSONAL		NET QUICK ASSETS \$ COMPANYS		NET WORKING CAPITAL \$ COMPANY	
WORKING CAPITAL SUFFICIENT IF "NO" HOW MUCH IS NEEDED? SOURCES? YES NO			ALL RECEIVABLES 90 DAYS CURRENT? YES NO IF NOT, AMOUNT PAST DUE \$		
ALL PAYABLES 90 DAYS CURRENT? YES NO IF NOT, AMOUNT PAST DUE \$					
SURETY VERIFIED BANK BALANCE? YES NO		AVERAGE BANK BALANCE \$		CONTRACTOR HAVE BANK LINE OF CREDIT? YES NO	
WITH WHOM?	SECURED? YES NO	TERMS	HOW MUCH PRESENTLY OWING \$		HOW MUCH L/C PRESENTLY UNUSED? \$

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HAS SURETY REQUIRED EXTRA SECURITY YES NO IF YES: WHAT TYPE INSTRUMENT		i.e. A CD OR CASHIERS CHECK FROM CONTRACTOR AMOUNT \$		
WORK IN PROCESS REPORT CURRENT AND REVIEWED If no, review your file and attach your report or SBA form 994F YES NO		HAS SURETY CHECKED WITH CURRENT SUPPLIERS? YES NO		DO ANY SUPPLIERS SHOW PAST DUE 60 DAYS OR MORE? YES NO
PART 3: CONTRACT INFORMATION (Completed with every application)				
PROJECT DESCRIPTION:			OBLIGEE NAME AND ADDRESS:	
PROJECT LOCATION:			OBLIGEE: FEDERAL LOCAL STATE PRIVATE SPEC DIST	
CONTRACTOR IS PRIME SUBCONTRACTOR JOB		ON THIS PROJECT TYPE CONSTRUCTION SERVICE SUPPLY OTHER (Specify)		PHASED PROJECT YES NO
CONTRACT AMOUNT \$		NEGOTIATED BID	IF BID, BID AMOUNT	IF BID, WHAT IS 2 ND LOW BID
BID BOND AMOUNT \$		PERFORMANCE AMOUNT \$	PAYMENT AMOUNT \$	MAINTENANCE PROVISION EXCEEDING 2 YRS. IN CONTRACT YES NO
LIQUIDATED DAMAGES YES NO AMOUNT \$ (CALENDAR/WORKING DAY)		SUBCONTRACTORS INVOLVED YES NO PERCENT %		MAINTENANCE BOND REQUIRED YES NO \$ NO. YEARS
SCHEDULED STARTING DATE	SCHEDULED COMPLETION DATE		CONTRACTOR STARTED JOB IF "YES" DATE STARTED If "YES" SBA Form 991 must be completed entirely and submitted to SBA before the guarantee agreement can be executed YES NO	
CHANGE OF SURETY YES NO		EXPLAIN IN COMMENTS SECTION	DATE OF LAST FINANCIAL STATEMENT	
SURETY'S REVIEW				
COMMENTS				
IN OUR OPINION THE PRINCIPAL APPEARS TO HAVE THE FINANCIAL / MANAGEMENT / TECHNICAL ABILITIES TO SUCCESSFULLY COMPLETE THIS CONTRACT, HOWEVER, I FEEL THIS CONTRACTOR FALLS BELOW THE NORMAL UNDERWRITING STANDARD OF OUR COMPANY, AND WE WILL NOT ISSUE BONDS TO THIS CONTRACTOR WITHOUT THE SBA GUARANTEE. THESE BONDS ARE REQUIRED BY THE ORIGINAL CONTRACT OR BID SOLICITATION				
ATTORNEY IN FACT				DATE
TYPE NAME				TELEPHONE NO. (Include Area Code)
TO BE COMPLETED BY SBA				
DATE RECEIVED BY SBA				BY (initials)
BASED ON THE UNDERWRITING DATA SUBMITTED: RECOMMENDATION / ACTION				
APPROVE	DISAPPROVE	SIGNATURE		TITLE
PLEASE NOTE: The estimated burden for completing this form is 15 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration Chief, AIB, 409 3 rd ST., S.W. Washington, D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503.				

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