

**Instructions to Complete  
Rider for General Use with Bond  
Form P&SP-2100**

A rider amending a surety bond requires complete and correct information to be submitted to the Packers and Stockyards Program on form P&SP-2100.

If any information is missing or incorrect, the Packers and Stockyards Program will return the bond rider form to the principal or surety for completion or correction. If the trustee's signature has not been obtained, the regional office will obtain the trustee's signature, and will ensure that the trustee retains an original copy of the rider for his or her files.

Operating without proper registration and bond may subject the principal to a fine of not more than \$11,000 for each violation.

Mail two fully executed bond rider forms to the regional office of the Packers and Stockyards Program as listed below. The states covered by each regional office are listed below their address.

| <b>Regional Offices of the Packers and Stockyards Program<br/>Grain Inspection, Packers and Stockyards Administration</b>  |  |  |
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| <b>Eastern Regional Office</b><br>Suite 230<br>75 Spring Street<br>Atlanta, GA 30303-3308<br>Telephone: (404) 562-5840<br>FAX: (404) 562-5848<br>E-mail:<br><a href="mailto:PSPAtlantaGA.GIPSA@usda.gov">PSPAtlantaGA.GIPSA@usda.gov</a> | <b>Western Regional Office</b><br>3950 Lewiston St., Suite 200<br>Aurora, CO 80011-1556<br>Telephone: (303) 375-4240<br>FAX: (303) 371-4609<br>E-mail:<br><a href="mailto:PSPDenverCO.GIPSA@usda.gov">PSPDenverCO.GIPSA@usda.gov</a> | <b>Midwestern Regional Office</b><br>Room 317<br>210 Walnut Street<br>Des Moines, IA 50309-2110<br>Telephone: (515) 323-2579<br>FAX: (515) 323-2590<br>E-mail:<br><a href="mailto:PSPDesMoinesIA.GIPSA@usda.gov">PSPDesMoinesIA.GIPSA@usda.gov</a> |
| States Covered   | States Covered   | States Covered   |
| AL, AR, CT, DC, DE, FL, GA, LA, MA, MD, ME, MS, NC, NH, NJ, NY, PA, RI, SC, TN, VA, VT, WV   | AK, AZ, CA, CO, HI, ID, KS, MT, NM, NV, OK, OR, TX, UT, WA, WY   | IA, IL, IN, KY, OH, MI, MO, MN, ND, NE, SD, WI   |

If you have any questions about the form or completing the form, please contact the regional office of the Packers and Stockyards Program listed above.

The Surety must complete line 1 through 14, as applicable, sign line 18, and complete lines 15 and 16.

The Principal must sign line 17.

If the bond names a trustee, the trustee must sign line 19.

| Line No. | Subject                     | Instruction  |
|----------|-----------------------------|--|
| 1        | Current Principal           | Enter name of the principal. The name must match that listed on the original bond, or the most current as changed by a previous rider.                               |
| 2        | City and State of Principal | Enter the city and state where principal operates.   |
| 3        | Surety                      | Enter the name of the surety company writing the bond.   |
| 4        | Bond Number                 | Enter the original bond number (do not list rider numbers).  |
| 5        | Bond Date                   | Enter the original effective date of the bond. This item should <b>ALWAYS</b> reference the date the bond was issued, <b>NOT</b> the date of the most current rider. |
| 6        | In Favor of                 | If a trustee is named on the original bond or added with a previous rider, enter the name of the trustee. If no trustee is named, leave this line blank.             |

| Line No. | Subject                           | Instruction   |
|----------|-----------------------------------|---|
| 7        | Increase in Bond                  | Enter the amount of the bond before the increase and the amount of the bond after the increase.   |
| 8        | Decrease in Bond                  | Enter the amount of the bond before the decrease and the amount of the bond after the decrease.   |
| 9        | Change in Name of Principal       | Enter the full name and address of the principal in the FROM section as it is stated on the original bond or previous rider, and the principal's current name and address in the TO section, as changed.  |
| 10       | Change in Name of Trustee         | Enter the full name and address of the former (previous) trustee in the FROM section, and the full name and address of the successor (current) trustee in the TO section.   |
| 11       | Add Clearing Services             | Check the appropriate box to indicate if the rider adds clearing services to the bond (Condition Clause 3 on form P&SP-2000).   |
| 12       | Delete Condition 3 from Agreement | Check the appropriate box to indicate if the rider deletes clearing services from the bond (Condition Clause 3 on form P&SP-2000).  |
| 13       | Add Clearee to Clause 3           | Enter the full name(s) and address(s) of the clearee(s) being added to the bond.  |
| 14       | Delete Clearee from Clause 3      | Enter the full name(s) and address(s) of the clearee(s) being deleted from the bond.  |
| 15       | Rider Effective Date              | Enter the effective date of the rider.  |
| 16       | Signed and Dated                  | Enter the date that the rider was signed and dated by the surety.   |
| 17       | Principal Signature               | Enter the name of the principal. The rider <b>MUST</b> be signed by someone with the authority to sign on behalf of the principal. For example, if the principal is a corporation, a responsible owner or officer must sign; if the principal is a partnership, one of the partners must sign.  |
| 18       | Surety Signature                  | Enter the name of the surety. The rider <b>MUST</b> be signed by someone with the authority to sign on behalf of the surety. In addition, the surety <b>must</b> attach a current <b>POWER OF ATTORNEY</b> for the person signing the rider. The date of the Power of Attorney <b>must</b> be equal to or prior to the effective date of the rider. |
| 19       | Trustee Signature                 | Enter the name of the trustee. If a trustee is named, the trustee, or someone authorized to sign on behalf of the trustee, must sign the rider.   |

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| U.S. DEPARTMENT OF AGRICULTURE<br>GRAIN INSPECTION, PACKERS AND STOCKYARDS<br>ADMINISTRATION<br>PACKERS AND STOCKYARDS PROGRAM | <b>RIDER FOR GENERAL USE WITH BOND</b><br><b>Required Under the Packers and Stockyards Act, 1921,</b><br><b>as Amended and Supplemented</b> |
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Know all that **(1)** \_\_\_\_\_  
 (Name of Current Principal)

\_\_\_\_\_ of **(2)** \_\_\_\_\_,  
 (City, State)

as Principal, and **(3)** \_\_\_\_\_  
 (Name of Surety)

as Surety, issued bond number **(4)** \_\_\_\_\_, dated **(5)** \_\_\_\_\_,

in favor of **(6)** \_\_\_\_\_,  
 (Name of Trustee)

as Trustee.

In consideration of the premium charged for the above-described bond, Principal and Surety agree to amend the bond as follows:

|  |   |
|--|---|
| Complete the applicable clause(s) set out below: |   |
| <b>7. Increase in Bond</b>                       | The bond identified above is increased<br>FROM: \$ _____ TO: \$ _____   |
| <b>8. Decrease in Bond</b>                       | The bond identified above is decreased<br>FROM: \$ _____ TO: \$ _____   |
| <b>9. Change in Name of Principal</b>            | The name and address of the Principal, as given on the bond identified above, are changed<br>FROM _____<br>(Name and Address)<br>_____<br>TO _____<br>(Name and Address)<br>_____ |
| <b>10. Change in Name of Trustee</b>             | The name and address of the Trustee, as given on the bond identified above, are changed<br>FROM _____<br>(Name and Address)<br>_____<br>TO _____<br>(Name and Address)<br>_____   |
| <b>11. Add Clearing Services</b>                 | The bond identified above is amended to add Condition 3, Clearing Services.<br><br><input type="checkbox"/> Yes <input type="checkbox"/> No                                       |
| <b>12. Delete Clearing Services</b>              | The bond identified above is amended to delete Condition 3, Clearing Services.<br><br><input type="checkbox"/> Yes <input type="checkbox"/> No                                    |

|   |   |
|---|---|
| <b>13. Add Clearee to Clause 3</b>      | The name(s) of: _____<br>(Name and Address)<br>_____<br>_____<br>_____<br>is (are) hereby added as clearee(s) to the bond identified above.     |
| <b>14. Delete Clearee from Clause 3</b> | The name(s) of: _____<br>(Name and Address)<br>_____<br>_____<br>_____<br>is (are) hereby deleted as clearee(s) from the bond identified above. |

PROVIDED, however, that the identified bond above shall be subject to all its agreements, limitations, and conditions except as herein expressly modified, and further that this bond and all riders attached thereto, including this rider, shall not be cumulative, and when loss shall occur under this bond during a period of time within which the penalty of the bond shall vary, the aggregate liability of Surety shall in no event exceed the largest penalty of this bond in force during the period of time within which such loss shall occur under this bond.

15. This rider shall become effective as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

16. Signed and dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

|                                |                                  |
|--------------------------------|----------------------------------|
| <b>17.</b> (Name of Principal) | (Signing on Behalf of Principal) |
| <b>18.</b> (Name of Surety)    | (Signing on Behalf of Surety)    |
| <b>19.</b> (Name of Trustee)   | (Signing on Behalf of Trustee)   |

20. Optional Additional Notes from Surety (for example special State requirements)

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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0580-0015. The time required to complete this information collection is estimated to average 1 hour 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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