



**MAINTENANCE BOND REQUEST &/OR
CONSENT TO FINAL PAYMENT REQUEST**

AGENT: Quantum Insurance Services

PRINCIPAL:

OBLIGEE:

PROJECT:

FINAL CONTRACT AMOUNT:

DATE COMPLETED:

% REQUIRED:
(Maint bond)

TERM:
(Maint bond) (years)

PERFORMANCE BOND #:

SPECIFIED BOND FORMS:

_____ YES -- COPIED ATTACHED SHOULD BE UTILIZED

_____ NO -- BONDING COMPANY FORMAT WILL BE ACCEPTABLE

**IF A CONSENT OF SURETY TO FINAL PAYMENT IS REQUIRED,
PLEASE ATTACH A CONTRACTOR'S AFFIDAVIT**

CONTRACTOR'S AFFIDAVIT

Bond No. _____

State of _____

County of _____

I _____ of the
(Name of Affiant & Title)

undersigned principal hereby certify that all obligations, claims and debts due laborers, material-men, subcontractors, suppliers and others incurred in or contingent to the performance of the work on project _____ have been fully satisfied, except:
(Description of Project)

Name and Address of Creditor

Amount Due

Principal

By _____
Title

Subscribed and sworn to before me
this _____ day of _____, 20____

Notary Public

Final Contract Price \$ _____

Amount of Retainage \$ _____

Amount of Final Payment \$ _____

Date of Acceptance _____