



WESTERN SURETY Company

—A HILL COMPANY—
SINCE 1909
Halifax, Nova Scotia

Revised February 2006

ADMINISTRATOR'S AND EXECUTOR'S BOND APPLICATION FORM

**(Application does not apply to Committee, Property Guardian's or Foreign Executor Bonds)
(Bond Amount Not To Exceed \$100,000.00)**

Agent/Broker: _____

Applicant (full name in which bond is to be issued) _____

Complete Postal Address _____ Postal Code _____

Occupation _____ Estimated Financial Worth _____

Bond Amount _____ Court in which filed _____

Name of Deceased _____ Date of Death _____

Last Address of Deceased _____

Was the Deceased related to you? _____ If so, how? _____

- Is Applicant under 21 or over 70 years of age? yes no
- Does Applicant have his/her own business? yes no
- Does Applicant have negative net worth? yes no
- Has any Surety ever declined a bond for this Applicant? yes no
- Is Applicant indebted to the Estate? yes no
- Has there been a prior Administrator? yes no
- Is there on going business included in the Estate? yes no
- Did the Deceased die Testate (with a Will)? yes no
- Are there any minors under the age of 18? yes no
- Is there a trust involved? yes no
- Is there anything that would prevent the Estate from being settled within *two (2)* years? yes no

If you have answered yes to any of these questions, please complete and submit a Long Form Commercial Surety Bond Application (Form J1)

IMPORTANT NOTICE: A report containing personal information may be obtained on the applicant at any time under this application or the subsequent bond, renewal or change in connection therewith. I have advised the applicant of this. I have also advised the applicant that the premiums are payable on the Bond until a Court Release is obtained or the Bond returned. To the best of my knowledge, the applicant is of good reputation, is capable of handling the administration of the Estate and he/she has my full recommendation.

I, on behalf of the applicant, authorize: (1) use of in the information requested on this form by Western Surety Company ("WSC") for the purposes of processing the application to which it relates, risk assessment, providing services, investigating claims, processing claims and any other purpose authorized by law (each, an "Authorized Purpose"); (2) access to, and disclosure of, this information to those WSC employees, contractors, administrators, reinsurers and agents who have a need to know for any Authorized Purpose and to any other person as authorized by law; and (3) WSC to use any information about the application contained in WSC's existing files for any Authorized Purpose. To the extent I am providing any information on this form about a third party, I confirm that I have the authority to provide such information.

I, on behalf of the applicant, authorize: (1) WSC and its agents to periodically investigate the applicant's credit history, financial standing, character and reputation for any Authorized Purpose; and (2) any credit reporting agency, financial institution with whom the applicant has had dealings and any reference provided to disclose to WSC and its agents any information about the applicant in connection with any such investigation.

Name of Solicitor _____ Phone No. _____

Signature of Solicitor for Estate _____