

TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157 www.tdlr.texas.gov

HEARING INSTRUMENT FITTERS AND DISPENSERS SURETY BOND COVER PAGE INSTRUCTIONS

DOCUMENTS SUBMITTED WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED FORM

- 1. <u>PRINCIPAL NAME</u> Provide the name of the business entity that is engaged in the fitting and dispensing of hearing instruments and is covered by the surety bond.
- 2. <u>PRINCIPAL PRIMARY ADDRESS</u> Provide the primary address of the Principal. This address should be the same as the address listed on the surety bond.
- 3. SURETY NAME Provide the name of the company issuing the surety bond.
- 4. <u>SURETY PRIMARY ADDRESS</u> Provide the primary address of the company issuing the surety bond. This address should be the same as the address listed on the surety bond.
- 5. <u>SURETY BOND NUMBER</u> Provide the surety bond number.
- 6. <u>EFFECTIVE DATE</u> Provide the date the surety bond became effective.
- 7. <u>LICENSEES COVERED UNDER BOND</u> List the licensees employed by the business entity (Principal) who are covered under this surety bond. Provide each licensee's name and license number. Attach additional pages if necessary.

SEND YOUR COMPLETED FORM TO:

Texas Department of Licensing and Regulation P.O. Box 12157 Austin, TX 78711-2157

Documents submitted will not be returned. Keep a copy of your completed document.

For additional information and questions, visit the <u>TDLR website</u> or reach Customer Service via <u>webform</u>. The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 (in state only), (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.

TDLR Public Information Act Policy:

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	PRINCIP	AL INFORMATION			
1.	Principal Name:				
	Rusiness Entity	Covered by the Surety Bond	1		
2	Principal Primary Address:	Covered by the Surety Bolic	1		
۷.	Fillicipal Filliary Address.				
	P O Box, Number, Street Name/Suite Number	City	State	Zip Code+4	
		City Y INFORMATION	State	Zip Code+4	
		TINFORWATION			
3.	Surety Name:				
	Company				
Company Issuing Surety Bond 4. Surety Primary Address:					
→.	ourety Filmary Address.				
	P.O. Box, Number, Street Name/Suite Number	City	State	Zip Code+4	
		INFORMATION	3.0.10	Zip 0000.4	
_					
5.	Bond #:	6. Effective Da	te:		
			Month/Day/Year		
7.	LICENSES COV	 /ERED UNDER THE E			
′ ·					
	Licensee Name		License Number		
					_
					_



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HEARING INSTRUMENT FITTERS AND DISPENSERS SURETY BOND

THE STATE OF TEXAS			
COUNTY OF	Bond Number:		
KNOW ALL MEN BY THESE PRESENTS:			
That we,	, as PRINCIPAL,		
(Principal's Name)			
whose address is(Principal Address	s, City and State) , and		
	, as SURETY,		
(Surety's Name)	, as sure it,		
being a surety company authorized to do business in the STexas Department of Licensing and Regulation, as OBLIGE (\$10,000.00), lawful money of the United States of Americ State of Texas and its pollical subdivisions and for the benefituly to be made, we bind ourselves and our legal represent and assigns, jointly and severally by these presents.	E, in the penal sum of TEN THOUSAND DOLLARS a, to be paid to the OBLIGEE for the benefit of the fit of judgment holders, for which payment well and		
The conditions of the above obligations are such that:			
WHEREAS, the PRINCIPAL or its employee is applying for and Dispenser in the State of Texas, pursuant to Chapter 4			
WHEREAS, the PRINCIPAL is required to provide this Regulation pursuant to Chapter 402, Texas Occupations (Code Chapter 112.			
NOW, THEREFORE, if the PRINCIPAL shall pay all (1) to and its political subdivisions by the PRINCIPAL, and (2) jupy for negligently or improperly dispensing hearing instruments, then this obligation shall	udgments that the PRINCIPAL may be required to ruments or for breaching a contract related to the		
This Bond is subject to the following conditions:			
This bond shall be in full force and effect on	, 20 (Month, Day, and Year)		

- 2. This bond shall be continuous until cancelled by action of the SURETY, the PRINCIPAL, or the OBLIGEE.
- 3. The SURETY may cancel this bond by giving written notice to the PRINCIPAL and the OBLIGEE not later than thirty (30) days before the date of cancellation.
- 4. This bond is open to successive recovery but in no event shall the SURETY'S liability for all claims under this bond exceed the penal sum of the bond.
- 5. No person may commence an action on this bond later than the third anniversary of the date this bond is cancelled.

Signed, Sealed and Dated this	day of	, 20
FOR PRINCIPAL	FOR SURETY	
(Business Name of PRINCIPAL)	(Business Name of SURETY)	
By:(Signature of Authorized Representative)	By:(Signature of Authorized Repr	
(Printed or typed name of Authorized Representative)	(Printed or typed name of Autl	norized Representative)
(Title of Authorized Representative)	(Title of Authorized Represent	ative)
(Business Address)	(Business Address)	
(City/State/Zip Code)	(City/State/Zip Code)	
(Business Telephone Number)	(Business Telephone Number	·)