

**SURETY BOND FOR  
CARE FACILITIES AND SERVICES**

Bond No. \_\_\_\_\_

We, \_\_\_\_\_,  
of \_\_\_\_\_ City of \_\_\_\_\_, State  
of \_\_\_\_\_, as principal, and \_\_\_\_\_, a corporation  
organized and existing under the laws of the State of \_\_\_\_\_ with a place of business  
at \_\_\_\_\_, City of \_\_\_\_\_, County  
of \_\_\_\_\_, State of \_\_\_\_\_, and licensed to transact a surety business in the State of  
Nevada, as surety, are indebted to the State of Nevada, Department of Human Resources, Division for Aging Services, in the penal  
sum of \_\_\_\_\_ Dollars  
(\_\_\_\_\_), for which payment principal and surety bind ourselves and our legal representatives and successors, jointly  
and severally.

The conditions of this obligation is that principal has been pursuant to Chapter 449 of the Nevada Revised Statutes (NRS) to operate  
a facility of intermediate care, skilled nursing, residential facility for groups, agency for nursing in the home or other care facility,  
and is required by statute to furnish a bond on the terms and conditions set forth in such statute.

If principal and all of the principal's agents and employees complies with the provisions of said statute, together with all amendatory  
and supplementary acts, now and hereafter enacted, and if principal applies all funds received, and performs all obligations and  
undertakings made pursuant to the provisions of said statute in the conduct of a facility for intermediate care, skilled nursing,  
residential facility for groups, or agency for nursing in the home by principal and by principal's agents and employees, then this  
obligation shall be null and void; otherwise it shall be in full force and effect.

This bond is intended to comply with the requirements of statute, and, in accordance with the provisions and requirements of  
statute, it is expressly provided that:

1. In accordance with the complaint procedure provided in NRS 447A.175, claim on this bond shall be made by a  
specialist for the rights of elderly persons upon determination by the specialist that principal is liable for damages to a  
patient.
2. The total aggregate liability of surety shall be limited to the sum of \_\_\_\_\_  
Dollars (\_\_\_\_\_)
3. The State of Nevada, acting through the Division of Health, Bureau of Health Care Quality and Compliance, reserves  
the right, at any time, to terminate this bond, except as to any liability already incurred or accrued, by written notice of  
such termination to surety delivered or mailed by certified or registered mail.
4. Surety may cancel this bond and be relieved of further liability by giving 30 days' written notice to the Division of Health,  
Bureau of Health Care Quality and Compliance at 4220 S. Maryland Pkwy. Suite 810, City of Las Vegas, State of  
Nevada, 89119 but such cancellation shall not affect any liability incurred or accrued prior to the termination of the  
notice period.

In witness whereof the signature of the said Principal and the corporate seal and the name of the said Surety is hereto affixed this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. This surety obligation shall become effective on the \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
(Principal)

\_\_\_\_\_, Surety

By: \_\_\_\_\_

By: \_\_\_\_\_  
Attorney in Fact

Nevada Resident Agent Countersignature:

By: \_\_\_\_\_

Physical Address of Covered Facility or Agency

Agency Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_