

**OKLAHOMA
SURPLUS LINES INSURANCE BROKER'S
INSURANCE BOND**

No. _____

KNOW ALL MEN BY THESE PRESENTS, that I _____, (hereinafter called Principal), and the _____, as Surety, at _____, are held and firmly bound unto the Insurance Commissioner of the State of Oklahoma (hereinafter called obligee), as obligee, in the amount required by the following schedule, \$ _____ good and lawful money of the United States of America, for the payment of which well and truly to be made, we hereby bind ourselves, our successors and assigns, jointly and severally, firmly by these presents.

AMOUNT OF BOND	
Estimated Gross Premium	Amount of Bond Required
Based on Previous Year	
\$1,000,000 and above	\$40,000
500,000 to 999,999	\$35,000
250,000 to 499,999	\$30,000
100,000 to 249,999	\$25,000
75,000 to 99,999	\$20,000
50,000 to 74,999	\$15,000
25,000 to 49,999	\$10,000
Everything below 25,000	\$ 5,000

WHEREAS, Principal has made application to the Insurance Commissioner of the State of Oklahoma for a license as a Surplus Lines Broker in accordance with the provisions of the Oklahoma Insurance Code, (Title 36, Oklahoma Statutes, Sections 101 et seq.).

NOW, THEREFORE, the condition of the obligation is such that if Principal will conduct business under said license in accordance with the provisions of said Oklahoma Insurance Code, then this obligation shall be null and void; otherwise to remain in full force and effect, subject, however, to the following conditions:

1. The Surety will immediately notify the Insurance Commissioner of any changes in the amount or parties to this bond.
2. This bond may be canceled and the Surety relieved of all further liability hereunder by the Surety's filing thirty (30) days prior written notice thereof with the Insurance Commissioner of the State of Oklahoma.
3. The liability of the surety for any and all claims hereunder shall in no event exceed the required amount.
4. The liability of the Principal shall in no way be limited merely by the Surety's satisfaction hereof.

SIGNED, SEALED, AND DATED THIS _____ day of _____, _____.

Principal N/A
Oklahoma resident or non-resident Producer Countersignature

Surety (SEAL)

By: _____
Attorney-in-Fact

Attorney-in-Fact

****Please attach a copy of the Power of Attorney and Certificate of Authority of Attorney-in-Fact.**