

PUBLIC ADJUSTER BOND

STATE OF GEORGIA

COUNTY OF _____

KNOW ALL MEN BY THESE PRESENTS:

That _____, whose residence or place of business is in the city of _____, State of Georgia, as Principal and _____, as Surety, a corporation duly authorized to write surety bonds in this State, are held and firmly bound unto John W. Oxendine, Commissioner of Insurance, State of Georgia and his successors in office in the penal sum of Five Thousand Dollars (\$5,000.00), lawful money of the United States of America, for the payment of which well and truly to be made, we bind ourselves and each of our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents:

The Conditions of the above obligation are such that:

WHEREAS, the above bounden _____ shall faithfully account to any insured whose claim he/she is handling for all monies or any settlement received in connection therewith as provided in Section 33-23-6 of the Georgia Insurance Code Annotated, and in 120-2-3-.18 of the Georgia Insurance Department Rules and Regulations, then this obligation shall be void, otherwise to remain in full force and effect..

PROVIDED, HOWEVER, the surety shall have the right to cancel this bond at any time by a written notice, stating when the cancellation shall take effect, and served on or sent by registered mail to the Commissioner of Insurance at least 60 days prior to the date that the cancellation become effective.

IN WITNESS WHEREOF, the said Principal has caused these presents to be executed by affixing hereto his or her signature, and the said Surety has caused these presents to be executed by the signature of its attorney-in-fact and its corporate seal to be affixed hereto this the _____ day of _____, 20____.

(Seal)

_____(Seal)
(Principal)

_____(Seal)
(Surety)

NOTE: Attach certified copy of Power of Attorney or representative Of Surety Company who signs bonds.

By: _____(Seal)

As _____ of Surety
(Title)

Attest: _____
(If required by power of attorney)

(Licensed Georgia Resident Agent & License No.)