



STATE OF MONTANA • DEPARTMENT OF ADMINISTRATION  
**DIVISION OF BANKING AND FINANCIAL INSTITUTIONS**  
301 South Park, Suite 316 • PO Box 200546 • Helena, MT 59620-0546  
**Phone:** 406-841-2920 • **Fax:** 406-841-2930  
**Website:** [www.banking.mt.gov](http://www.banking.mt.gov)

## MONTANA MORTGAGE BROKER LICENSEE SURETY BOND

Date: \_\_\_\_\_ Bond No. \_\_\_\_\_

\_\_\_\_\_ (*insert company's full legal name*) with NMLSR Unique Identifier of \_\_\_\_\_, as principal, and \_\_\_\_\_, a corporation authorized to transact surety business in the State of Montana, as surety, are held and firmly bound unto the State of Montana in the full penal sum of \_\_\_\_\_ dollars lawful money of the United States, for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

WHEREAS, the above named principal has applied to the Montana Division of Banking and Financial Institutions (Division) for a license to engage in the business of making residential mortgage loans under the Montana Mortgage Act (MMA), Title 32, Chapter 9, Part 1 of the Montana Code Annotated, as amended.

NOW, THEREFORE, the condition of the foregoing obligation is such that if the principal obligor, its agents, employees, and independent contractors shall comply with the provisions of the MMA, all regulations duly promulgated thereunder, and all other laws applicable to the conduct of its business, and shall pay any and all monies that may become due and owing to the State of Montana which shall include, but not be limited to

monies owed for examination fees, fines, or civil penalties under and by virtue of the provisions of the MMA or the rules of the Division, and shall pay any and all monies that may become due and owing any person due to the violation of any such laws and regulations by the principal through its own acts or the acts of any employee, agent, or independent contractor of the principal, then this obligation will be void: otherwise the same will remain in full force and effect.

This bond is subject to the following conditions:

1. The total aggregate liability of the surety herein shall be limited to the payment of \_\_\_\_\_ (\$\_\_\_\_\_).

2. The surety may cancel this bond by giving 30 days written notification to the principal and to the Commissioner of the Division at: P.O. Box 200546, Helena, Montana 59620-0546.

3. In the event the principal under this bond is served with notice of any action commenced against principal under the bond, the principal shall within 30 days after the commencement of the action or within 30 days after the entry of judgment, give written notice of the filing to the Division.

4. In the event the surety makes full or partial payment on this bond, surety shall within ten days after it pays any claim or judgment give written notice of the payment to the Division.

5. The effective date of this bond shall be \_\_\_\_\_.

IN WITNESS WHEREOF, the signatures of the principal and surety are hereto affixed and attested by its duly authorized representatives this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**Note:** A person other than a corporate officer of the surety executing in the surety's behalf must attach the power of attorney authorizing the person to execute bonds for the surety.

\_\_\_\_\_  
(Principal)  
  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Print Name  
  
\_\_\_\_\_  
Title

*(Corporate Seal of  
the Surety)*

\_\_\_\_\_  
(Surety)  
  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Print Name  
  
\_\_\_\_\_  
Title

Name, address, and telephone number of Surety Representative to contact in the even a claim must be filed:

Name of Surety Representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_