

1. GUARANTOR

Name

▲ insurance company/bank

Contract No.

CURRENCY

▲ applies for all amounts in the entire form, if empty, all information in EUR

2. SUPPLIER

Name/Company

Street, No.

Post Code/City

Contact

◀ name of contact

Telephone

Telefax

Email

3. CLIENT

Name/Company

Street, No.

Post Code/City

Country

4. ORDER DETAILS

order/contract date

order No.

order total

amount

order description

5. SURETY TOTAL

amount

6. SURETY TYPE

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Warranty | <input type="checkbox"/> Delivery of Good |
| <input type="checkbox"/> Performance | <input type="checkbox"/> Downpayment/Advance Payment/Payment on Account |
| <input type="checkbox"/> Bidding | <input type="checkbox"/> Customs |
| <input type="checkbox"/> other _____ | |

7. SURETY TEXT

- standard text** ◀ text of guarantor
- special text** ◀ please enclose

8. SURETY LIMITATION

- limited, to date** _____ **date of submission** _____ ◀ for Bid Sureties
- unlimited, prospective expiry** _____

9. SURETY ISSUED TO

- Name/Company** _____ ◀ principal debtor, if different from person ordering the surety
- Street, No.** _____
- Post Code/City** _____

10. FRONTING GUARANTOR

- bank to be involved** _____ ◀ if required for foreign sureties
-
-
-

11. CERTIFICATE TO BE SENT TO

- us
- client
- other recipient _____

Name/Company _____

f.a.o. _____

Street, No. _____

Post Code/City _____

12. ONLY FOR CONSORTIUM ORDERS

- We apply for the entire surety for the consortium
- We only apply for our consortium share
- Sub-Guarantee ◀ include consortium shareholders and allocation
- Return Guarantee consortium partners
- debit of the surety amount in partial amounts ◀ according to consortium allocation, if possible

◀ several answers possible

13. REMARKS

place and date _____ , the _____

company stamp
and signature _____

◀ digital signature possible