

Schmalz & Associates PLLC
P.O. Box 1811
Liberty Hill, TX 78642



Phone: 512-640-6444
Email: eric@schmalzsurety.com
www.schmalzsurety.com

BANK VERIFICATION

The undersigned hereby authorizes the following information to be released to Schmalz & Associates PLLC.

APPLICANT SECTION

Account Name: _____ Account Number: _____

Printed Name Signature Date

BANK SECTION

The above account holder has applied to Schmalz & Associates PLLC for surety bond credit and has provided your bank as a reference. We would appreciate a prompt reply to the questions below. Your response will be treated in confidence except where disclosure of this information is required by applicable law.

- 1. This customer has been with our bank since _____
- 2. The average 6 month balance of this account is _____
- 3. The current balance of this account is _____
- 4. Has a line of credit been established? _____
 - If so, what is the amount of the line of credit? _____
 - Current outstanding balance on the line of credit? _____
 - How is this line of credit secured? _____
 - What is the renewal date of line of credit? _____
- 5. What is your experience and opinion of this applicant's financial responsibility and business reputation?

Name of Bank _____
Address _____
Phone Number _____
Bank Officer Name: _____ Title: _____
Signature: _____ Date: _____

Please return to:

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