



BOND REDUCTION REQUEST

The current principals must have continuously owned the business for the preceding five (5) years or longer. The business must not have had any administrative action taken by the Department within the preceding five (5) years.

Business Name _____ Business License No. _____

Mailing Address _____
Street City State Zip Telephone

Physical Address _____
Street City State Zip

Name and title of each business principal:

Name _____	Title _____
Name _____	Title _____
Name _____	Title _____
Name _____	Title _____

Business License was first issued by the Department on: _____
(Month/Day/Year)

Current bond amount: \$ _____, requesting bond amount to be reduced to: \$ _____

I certify the above information to be true and correct.

_____ Principal's Name (Print)	_____ Title
_____ Principal's Signature	_____ Date

FOR OFFICE USE ONLY

In the past five years has the licensee had:

Any derogatory action taken against the business license? Yes No

Type of action _____ Date of Action _____

A lapse in bond coverage? Yes No

Begin Date _____ End Date _____

Does the licensee have any action pending against the license? Yes No

Type of action _____ Begin Date _____

If the answer is "Yes" to any of the questions listed above, the reduction request may be denied.

Has the business been licensed for five years or more? Yes No

Approved, reduced to \$ _____ Denied, reason _____
(attach copy of approval letter) (attach copy of denial letter)

 Reviewed By Date