



Office of Comptroller Bill Henry  
204 City Hall, 100 Holliday Street  
Baltimore, Maryland 21202  
Comptroller.BaltimoreCity.gov  
410-396-4755

## SURETY BOND VERIFICATION/VALIDATION FORM

**Licensee:**

**Bond #:**

**Effective Date:**

**Amount:**

**Surety Company:**

### A. Use of Form

This form is to be used by the issuing SURETY on behalf of the Licensee to validate/verify a current and valid bond. The form on the execution page must contain the signature of an appropriate, duly authorized individual. (Electronic signatures are acceptable.)

### B. Names

Individuals' names, except for executing signatures, shall be given in full (first name, middle name, last name). Initials for a first or last name are not acceptable unless the individual legally has only an initial for name. If so, please indicate this after the initial.

### C. Privacy Statement

The information will be used for the principal purpose of determining whether the Comptroller should grant or deny approval to the licensee. Information supplied on this form may be subject to [FOIA](#) request and included in the public files of the Comptroller and will be available for inspection by any interested person in accordance with local, State, and Federal regulations.

### D. Filing of Form

The Surety Bond Verification/Validation Form must be filed with the Office of the Comptroller, 204 City Hall, 100 N. Holliday Street, Baltimore, Maryland 21202. The form can be emailed to : \_\_\_\_\_@BaltimoreCity.gov with the subject: SURETY BOND VERIFICATION/VALIDATION.



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### SURETY BOND VERIFICATION/VALIDATION

Pursuant to Baltimore City Code, every person, firm, or corporation so licensed, shall, at the time of receiving such license, enter into an obligation to the Mayor and City Council of Baltimore with good and sufficient sureties to be approved by the Comptroller of the City of Baltimore. The Surety must be approved by the City Comptroller, conditioned on the licensee's performance in accordance with the provisions and intent of the Baltimore City Code. If approved, the accompanying duplicate bond shall be returned to the Director of Finance.

I hereby certify that a surety bond remains in full force and effect for the aforementioned term on behalf of \_\_\_\_\_, Licensee.

**Surety:**

(PRINT NAME)

**By:**

(SIGNATURE)

**DATE**

\_\_/\_\_/\_\_\_\_

Telephone No. for Surety: