

RESUME

Name of Owner (or Key Personnel): _____

Home Address: _____

City, State, Zip Code: _____ Phone No. _____

PERSONAL DATA

Date of Birth: _____ Social Security Number: _____ Marital Status: _____

Driver's License Number: _____ Spouse's Name: _____

Spouse's Employer, Employer's Address, Position and Length of Employment: _____

EDUCATION

Did you graduate from High School? YES _____ NO _____ (Check One)

Did you attend College? YES _____ NO _____ (Check One) From _____ to _____. Please list the college(s) you attended and any degrees received:

Please list any specialized education you have received relating to construction and/or your profession:

BUSINESS/PROFESSIONAL EXPERIENCE

Please list any business and professional experience relating to construction and/or your profession. (Please indicate firm name, length of time employed, occupation, largest project you were involved in, and reason for leaving.): _____

PERSONAL REFERENCES

(list name, address, phone number, length of time acquainted and relationship to reference.):

ATTACH ADDITIONAL PAGES IF NEEDED
MAKE AS MANY COPIES AS NECESSARY



BONDS
SOUTHEAST, INC.

5550 Franklin Pike, Ste 202
Nashville, TN 37220
Contract & Commercial Surety Bonds

(615) 321-9700
Toll Free: 1-877-992-6637
Fax: (615) 321-9702

BUSINESS PLAN

Name of Business _____

Business Address

Year Business Began _____ If Corporation, when did it incorporated? _____

Fiscal Year End _____

Number of Employees when you began Business _____ Currently _____

Name and Position of Relatives who work for Business

1. _____ 2. _____

3. _____ 4. _____

Sales Volume for First Year in Business \$ _____ Sales Volume for Latest Year \$ _____

What Exactly Does Your Business Do? _____

Outline Your Business Goals for the Next 12 Months _____

Continuity Provisions

Do you have Life Insurance? YES _____ NO _____ (Check One) If Yes, How Much? \$ _____

Is Your Life Insurance to be paid to the Business? YES _____ NO _____ (Check One)

Do you have enough Life Insurance to cover all Outstanding Work On Hand?
YES _____ NO _____ (Check One)

How Much Life Insurance do you have for your Family? \$ _____

Give a Description of Continuity Provisions, including Management Experience, You have for Your Business.

In the Event of Your Death, Who would Run Your Business? _____

What will happen to Your Business when You Retire? _____
