

**PURPOSE:** Use this form to submit a surety bond to assure the collection of money due to Virginia.  
**INSTRUCTIONS:** Submit completed form to the Fuel Tax Unit at the above address. **NOTE:** Bond should be executed in quadruplicate. Original to be filed with Department of Motor Vehicles, duplicate and triplicate for Surety Company, quadruplicate for Principal.

Surety Company's Bond Number: \_\_\_\_\_ Effective Date: \_\_\_\_\_

**BUSINESS OPERATION TYPE**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Aviation Consumer             | <input type="checkbox"/> Distributor                  | <input type="checkbox"/> Refiner                      |
| <input type="checkbox"/> Blender                       | <input type="checkbox"/> Fuel Alcohol Provider        | <input type="checkbox"/> Retailer of Alternative Fuel |
| <input type="checkbox"/> Bonded Importer               | <input type="checkbox"/> Occasional Importer          | <input type="checkbox"/> Supplier                     |
| <input type="checkbox"/> Bulk User of Alternative Fuel | <input type="checkbox"/> Provider of Alternative Fuel | <input type="checkbox"/> Terminal Operator            |

**KNOW ALL MEN BY THESE PRESENTS,** That \_\_\_\_\_ (Name of Principal)  
 of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_  
 (City or Town)  
 whose principal place of business is located at \_\_\_\_\_, as PRINCIPAL  
 and \_\_\_\_\_ a corporation organized under the laws of  
 \_\_\_\_\_ (Name of Surety)  
 \_\_\_\_\_, and duly authorized to engage in business in the Commonwealth of Virginia, with its principal office therein  
 located at \_\_\_\_\_ in the City of \_\_\_\_\_, as SURETY,  
 are held and firmly bound unto the Commonwealth of Virginia in the sum of \_\_\_\_\_ dollars  
 (\$ \_\_\_\_\_) lawful money of the United States of America, to be paid to the said Commonwealth of Virginia, to which payment well and  
 truly to be made, we bind ourselves and each of us, our and each of our heirs, executors, administrators, successors and assigns, jointly and severally,  
 firmly by these presents. Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_ A. D. \_\_\_\_\_ (Year)

**THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT:**

**WHEREAS,** PRINCIPAL wishes to transact fuel related business in the Commonwealth of Virginia as defined in Title 58.1, Chapter 22 of the Code of Virginia (1950) as amended, and has applied for the license type indicated above to act as such, to be issued by the Commissioner of the Department of Motor Vehicles pursuant to Title 58.1, Chapter 22 of the Code of Virginia (1950) as amended; and  
**WHEREAS,** pursuant to Title 58.1, Chapter 22 of the Code of Virginia, a bond executed by PRINCIPAL and a surety company licensed to do business under the laws of the Commonwealth of Virginia must be on file with the Commissioner of the Department of Motor Vehicles in order for PRINCIPAL to obtain said license; and  
**WHEREAS,** PRINCIPAL and SURETY have entered into this Bond for the purpose of satisfying the bond requirements of Title 58.1, Chapter 22 of the Code of Virginia;

**NOW THEREFORE,** if PRINCIPAL shall well and faithfully comply with the provisions of Title 58.1, Chapter 22 of the Code of Virginia, and shall promptly file true and timely reports of and shall promptly pay any and all fuels taxes which are now or which may hereafter be levied or imposed by the Commonwealth of Virginia, together with penalties and interest thereon and fines, uncollectible check fees and attorneys fees due from PRINCIPAL to the Commonwealth of Virginia, beginning with the effective date of this Bond and continuing until this Bond is lawfully terminated, then the above obligation shall be void, otherwise to remain in full force and effect.

**IN WITNESS WHEREOF,** This instrument has been duly executed by the above-named PRINCIPAL and SURETY the day and year above written.

(Corporation, Limited Liability Company sign below)

Attest: \_\_\_\_\_ (Name of Principal)  
 \_\_\_\_\_ (Secretary) \_\_\_\_\_ (President)

SEAL  
 (Sole Proprietorship, Partnership, Limited Partnership, and all others sign below with witness(es))

WITNESS  
 \_\_\_\_\_ [SEAL]  
 \_\_\_\_\_ [SEAL]  
 \_\_\_\_\_ [SEAL]

COUNTERSIGNED: (Not Required) ATTEST:  
 By \_\_\_\_\_ (Virginia Representative) \_\_\_\_\_ [SEAL]  
 (Name of Surety Company)

Address \_\_\_\_\_ By \_\_\_\_\_ [SEAL]  
 (Official or Attorney in Fact for Surety Co.)

This Bond shall continue in force from year to year, unless terminated in accordance with the provisions of Title 58.1, Chapter 22 of the Code of Virginia, as amended. SURETY shall be released and discharged from any and all liability to the Commonwealth accruing under the terms of this Bond after the expiration of sixty (60) days from the date upon which SURETY shall have lodged with the Commissioner of the Department of Motor Vehicles written request to be released and discharged from this Bond. Such release and discharge shall not operate to relieve, release or discharged SURETY from any liability accrued under the Bond at the time of the written request or during the sixty-day period following the lodging of the written request.

Approved this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (Year)  
 DEPARTMENT OF MOTOR VEHICLES  
 By \_\_\_\_\_ (Authorized Signature)

# ACKNOWLEDGMENT OF PRINCIPAL

STATE/Commonwealth of \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_, to-wit:

I, \_\_\_\_\_, a notary public

in and for the \_\_\_\_\_ aforesaid, in the State of \_\_\_\_\_, do certify that on the

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally came, in my \_\_\_\_\_  
(Year)

aforesaid \_\_\_\_\_

who, being by me duly sworn, did depose and say that he resides in \_\_\_\_\_

that he is the \_\_\_\_\_ of \_\_\_\_\_  
(Title) (Name of Company)

the \_\_\_\_\_ described in and which executed the above instrument as PRINCIPAL; that he  
(Type of Company)

knows the seal of said company; that the seal affixed to said instrument is such company seal; that it was so affixed by order of and with the authority to act on behalf of the said company, and that he signed his name thereto by like order.

I further certify that my term of office expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. My Registration Number is \_\_\_\_\_  
(Year)

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(Year)

\_\_\_\_\_  
(Notary Public Signature/Seal)

# AFFIDAVIT AND ACKNOWLEDGMENT OF SURETY

STATE/Commonwealth of \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_, to-wit:

I, \_\_\_\_\_, a notary public in and for the \_\_\_\_\_

aforesaid, in the State aforesaid, do certify that \_\_\_\_\_

personally appeared before me in my \_\_\_\_\_ aforesaid and made oath that he is

\_\_\_\_\_ of the \_\_\_\_\_

that he is duly authorized to execute the foregoing bond by virtue of a certain power of attorney of said company, dated

\_\_\_\_\_, and recorded in the Clerk's office of the \_\_\_\_\_ of

\_\_\_\_\_, in Deed Book No. \_\_\_\_\_, page \_\_\_\_\_;

that said power of attorney has not been revoked; that the said company has complied with all the requirements of law regulating the admission of such companies to transact business in the State of Virginia; that the said company holds a license of the State Corporation Commission authorizing it to do business in the State of Virginia; that its surplus to policyholders is \$ \_\_\_\_\_; that the penalty of the  
**This blank must be properly filled out**

foregoing bond is not in excess of ten per centum of said sum; that the said company is not by said bond incurring in the aggregate, on behalf or on account of the principal named in said bond, a liability for an amount larger than one-tenth of its surplus to policyholders; that the said company is neither directly nor indirectly under the same ownership or management as the principal in this bond; that the said company is solvent and fully able to meet promptly all of its obligations, and the said \_\_\_\_\_ thereupon, in the name and on behalf of the said company, acknowledged the foregoing writing as its act and deed.

My term of office expires \_\_\_\_\_, \_\_\_\_\_. My Registration Number is \_\_\_\_\_  
(Year)

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(Year)

\_\_\_\_\_  
(Notary Public Signature and Seal)