



SURETY BOND FORM FOR EMPLOYMENT AGENCY LICENSE APPLICATIONS

SECTION IV - Continued

*This section is to be completed by employment agency license applicants only.
PLACEMENT AGENCY REGISTRATION APPLICANTS GO DIRECTLY TO SECTION V.*

Bond No. _____

KNOW ALL PERSONS BY THESE PRESENTS:

That,

NAME OF AGENCY OWNER IF SOLE PROPRIETORSHIP; PARTNERS IF PARTNERSHIP;
PRESIDENT OR TREASURER IF CORPORATION/LLC/LLP

as Principal(s), of

NAME OF EMPLOYMENT AGENCY

of

BUSINESS ADDRESS(ES) OF THE ABOVE-NAMED AGENCY

having filed with the office of the Massachusetts Department of Labor Standards, on or about the _____ day
of _____ of 20_____, an application for an Employment Agency License, per M.G.L. c. 140,
§46C, and

NAME OF SURETY

ADDRESS OF SURETY

as Surety, a corporation duly organized and existing under the laws of the State/Commonwealth/Territory of

_____ and being duly authorized to
transact the business of indemnity and suretyship in this Commonwealth of Massachusetts by its Division of
Insurance, do hereby acknowledge our indebtedness to the People of the Commonwealth for the use and benefit
of any person(s) having a claim under the conditions of this obligation for violations of any of the provisions of
M.G.L. c. 140, §§46A through 46Q, in the sum of \$3,000.00 (three thousand dollars), as required by M.G.L. c.
140, §46F, provided, however, that the aggregate liability hereunder shall not exceed the sum of \$3,000.00
(three thousand dollars), regardless of the number of claimants, and shall not be construed as individual liability.

LIABILITY for the payment of this sum, to which we hereby obligate and bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, becomes effective upon the following conditions:

1. That the Principal(s) become licensed to transact business in the Commonwealth of Massachusetts as an Employment Agency and that the Principal(s) have been found to have failed to strictly comply with all of applicable provisions of, and orders, rules and regulations issued pursuant to, M.G.L. c. 140, §§46A-46R inclusive and the applicable securities statutes of the Commonwealth of Massachusetts in which such Principal(s) is/are licensed.
2. Upon the occurrence(s) of such conditions, said bond shall be payable to the people of the Commonwealth and shall pay all damages occasioned by any person by reason of any misstatement, misrepresentation, fraud or deceit or any unlawful act or omission of said licensee, his agents or employees, while acting within the scope of their employment, and made, committed or omitted in the business conducted under such license.

THIS Bond shall expire at such time as the Principal(s)'s license is surrendered, terminates through non-renewal or is revoked by the Department of Labor Standards except as to liability for acts or omissions which occur prior to such time. This Bond may also be cancelled by the Surety upon sixty (60) days written notice by registered mail to the Principal and to the Massachusetts Department of Labor Standards in which case this Bond shall be considered cancelled upon the expiration of sixty (60) said days period except as to liability for acts or omissions which occur prior to the date of cancellation. Notice shall be deemed effective upon receipt by the applicable state agency of said written notice along with sufficient proof of notice to the Principal.

NO suit may be maintained to enforce any liability arising under this Bond unless brought within three (3) years after discovery of the act or omission upon which liability is based.

IT is understood and agreed that any person(s) having a claim under the conditions of this obligation may initiate suit in any court of competent jurisdiction against the Principal(s) and/or the Surety upon this Bond. This Bond shall not impair or limit the right of recovery otherwise available pursuant to law, nor shall the amount of the Bond be relevant in determining the amount of damages or other relief to which any plaintiff may be entitled.

THIS BOND IS CONTINUOUS UNTIL CANCELED BY SURETY COMPANY.

WITNESS OUR SIGNATURES, this _____ day of _____ 20_____.

For Employment Agency:

PRINCIPAL (Signature of Agency Owner if Sole Proprietorship; Partners if Partnership; President or Treasurer if Corporation/LLC/LLP)

of _____
EMPLOYMENT AGENCY NAME

For Surety:

SURETY AGENT SIGNATURE

SURETY AGENT PRINT NAME

DATE BOND ISSUED

NAME OF AUTHORIZED SURETY COMPANY

ADDRESS OF AUTHORIZED SURETY COMPANY