

# Trade Bond Proposal Form

Bonds in favour of the Revenue & Customs Authorities relating to Deferred Duty/Removal/Transshipment/Tax Warehouse

## 1. Applicant

Full Name: \_\_\_\_\_

Business of Applicant: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Registered Address (if different) \_\_\_\_\_

Company Registration Number: \_\_\_\_\_

## 2. Particulars of Directors or Principals (Attach a list if required)

Name: (1) \_\_\_\_\_

Address: \_\_\_\_\_

Name: (2) \_\_\_\_\_

Address: \_\_\_\_\_

Name: (3) \_\_\_\_\_

Address: \_\_\_\_\_

Name: (4) \_\_\_\_\_

Address: \_\_\_\_\_

## 3. Auditors

Auditors Name: \_\_\_\_\_

Address: \_\_\_\_\_

#### 4. Bankers

Bankers Name: \_\_\_\_\_

Bankers Address: \_\_\_\_\_

\_\_\_\_\_

#### 5. Details of Bond Required

Type of Bond (Warehouse/Removal etc.) \_\_\_\_\_

Bond Amount Required: \_\_\_\_\_

Nature of Goods Involved: \_\_\_\_\_

Location of Warehouse/Premises: \_\_\_\_\_

\_\_\_\_\_

Commencement of Cover: \_\_\_\_\_

Annual Renewal Date: \_\_\_\_\_

#### 6. Additional Information

Has the Irish Customs and Excise Authority Ever	YES	NO
(i) Declined an Application?	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Issued a pay notice requesting payment of any duty owing following default by the proposer or any principal or director?	<input type="checkbox"/>	<input type="checkbox"/>

#### 7. Have you Proposed to any other Sureties?

(i) For This Bond? If "YES", please give names of Sureties and results of the applications	<input type="checkbox"/>	<input type="checkbox"/>
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(ii) For Previous Bonds? If "YES", please give names of Sureties and results of the applications	<input type="checkbox"/>	<input type="checkbox"/>
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**8. Disclosure**

	YES	NO
<i>Has the applicant, any of its Directors or Partners ever Required a surety to make a payment under a bond or guarantee</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Been bankrupt or entered into an arrangement with creditors whether voluntary or not, or been a Director or Partner of a Firm or company to which a receiver or Liquidator has been appointed?</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Has your Company ever had any County Court Judgments or adjudications awarded against it?</i>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered **YES** to any of the above please give further details dates, values, reasons and outcome in the box below:-

I hereby give permission for the surety to carry out credit checks on my behalf  **YES**

**IMPORTANT**

I/WE DECLARE THAT THE ABOVE STATEMENTS ARE TRUE AND COMPLETE AND THAT I/WE HAVE NOT CONCEALED ANY MATERIAL INFORMATION FACT OR CIRCUMSTANCE WHETHER REQUESTED OR NOT THAT COULD AFFECT A DECISION OR CONDITION APPLYING TO ANY DECISION.

**NB: Please send this application back with the following :**

- **AUDITED Accounts for the last two financial years**
- **Most Recent Management Accounts**
- **Bond Wording supplied by the Revenue (if Known)**
- We May Also Require:
- Work in Progress Schedule
- Bank Information

Signature..... Position..... Date.....