Texas Department of Housing and Community Affairs MANUFACTURED HOUSING DIVISION P. O. BOX 12489 Austin, Texas 78711-2489 (877) 313-3023, (512) 475-2200 FAX (512) 475-3506 Internet Address: www.tdhca.state.tx.us/mh/index.htm

Continuous Manufactured Housing Licensing Surety Bond

The State of	MHD license # (if known):
County of	
I (we)	
	Owner, Partner, or Corporate Officer)
to be licensed as a manufactured housing	
(Manufa	cturer, Retailer, Broker, or Installer)
doing business as	//
(Assumed or Corporate Nam	
at (Physical Street Address, City, State, Zip)	/ , (Mailing Address if Different)
(Physical Street Address, City, State, Zip)	(Mailing Address if Different)
() , as PRINCIPAL and (Telephone)	d
(lelephone)	(Surety)
in the Texas Manufactured Housing Standards Act (the "Ac sum of \$, payable at Austin, Travis Cou Manufactured Housing Division ("MHD") to satisfy claims	s a surety company in this state, we are firmly bound unto the special account referred to ct"), Subchapter I, as the Manufactured Homeowner Consumer Claims Program, in the inty, Texas for use by the Texas Department of Housing and Community Affairs, s resulting from any violation by the licensee or cause of action directly related to the tallation of a manufactured home for the payment of which, well and truly to be made, gns, jointly and severally, firmly by these presents.
and responsibilities under the Act as that statute is presen	GATION is such that the PRINCIPAL shall faithfully discharge all obligations, duties, ttly worded and as it may hereafter be amended to read, and all applicable rules and Housing Division adopted to carry out the provisions of said Act, subject, however, to
 This bond is valid when received by the Manufactured 1 The bonding company must provide written notification 	n to MHD at least sixty (60) days prior to the cancellation of this bond. face value of the bond. The surety shall not be liable for successive claims in excess of
IN WITNESS WHEREOF said PRINCIPAL and SURET	Y have executed this bond this day of,
20, to be effective on the day of	, 20
Surety By:	(Signature)
	(Printed Name)
Title:	
Surety Company Name:	
Mailing Address:	
	Street / P.O. Box City Zip
Phone #:	() Fax #: ()
Signature of Owner, Partner, or Corporate Officer:	Title:
Bond Number:	

(For Surety Company's Use)

NOTE: The physical street address listed on this surety bond form must match the physical street address listed on the licensing application.