# MANUFACTURER OR MODULAR CONTRACTOR SURETY BOND FOR LICENSURE WITH THE MISSISSIPPI FIRE MARSHAL'S OFFICE, FACTORY BUILT HOME DIVISION

**Revised 07/2026**

STATE OF _____

COUNTY OF _____

**This form shall not be altered in any way**

**Part 1: Bond, Surety, and Principal.**

| | | |
|---|---|---|
| Bond #: | Original Bond Date of Issuance: | If a Continuation Bond, Effective Date |
| Name of the Surety Company: | NAIC # of Surety Company: | MID License Number of Surety Company: |
| Name of Principal (Licensee) | Applicant License Number: | Amount of Bond:<br>$<br><br>(as required by Regulation MH-2008-1) |

**Part 2: Type and Bound Amount**

The type and amount of the Bond for one year commencing on the original date of issuance or continuation stated herein above at Part 1 is as follows:

**Manufacturer or Modular Contractor License, Bond Equal to $500,000.00 current U.S. Dollars (per facility) OR $1,000,000.00 current U.S. Dollars (for 3 or more facilities)**

**Part 3:** KNOW ALL MEN BY THESE PRESENTS THAT, the Principal and Surety, who, after being duly sworn, deposed and said:

**That** they are firmly bound unto the Commissioner of Insurance, State of Mississippi, in his position as State Fire Marshal, or his successor in office, under the Surety Bond, conditioned upon the Principal well and faithfully discharging and performing the duties incumbent upon him under the provisions of all applicable laws, including but not limited to Title 75, Chapter 49 of the Mississippi Code and Mississippi Insurance Department Regulation MH-2008-1;

**That** the condition of this obligation is such that if the above named Principal shall well and faithfully discharge and perform the duties incumbent on him under the provisions of all applicable laws, including but not limited to Title 75, Chapter 49 of the Mississippi Code and Mississippi Insurance Department Regulation MH-2008-1, then in such case the above obligation is to become null and void, else to remain in full force, effect and virtue;

**That** the provisions of all applicable laws, including but not limited to Title 75, Chapter 49 of the Mississippi Code and Mississippi Insurance Department Regulation MH-2008-1, for Principals and Sureties are applicable;

**That** any Consumer who sustains loss or damage by reason of any act or omission covered by this Bond may, in addition to any other remedy, bring an action in his/her name on this Bond for the recovery of damages sustained by the Consumer. Said action must be brought before said Obligee directly by the Consumer or from the Consumers legal representative. Validation of the claim and determination of the amount of loss or damage sustained by the Consumer shall be responsibility of the Surety Company. Upon a determination of loss, the Obligee may make a claim to include administrative cost against the Bond up to the penal sum. Regardless of the number of years this Bond remains in force or the number of claims brought against the Bond, said Surety shall not be obligated to pay any sums in excess of the stated aggregate penal sum of the Bond.

**That** this Surety Bond shall not be terminated unless the Surety provides at least sixty (60) days' prior written notice will have been filed with the Commissioner of Insurance, Mississippi State Fire Marshal's Office, 239 N. Lamar Street, Suite 101, Jackson, MS 39201, or by email to mhlicense@mid.ms.gov Subject: Surety Bond Information, and given to the Principal;

**That** this obligation may be continued for any subsequent year by a continuation certificate duly signed and sealed by the Principal and Surety, subject to the terms and conditions of the original bond, and filed with the Commissioner of Insurance, State of Mississippi, as directed above;

**That** the Obligee may bring claim against the Bond up to twelve (12) months after the Bond has been terminated or has been cancelled for any liabilities accrued while the bond was in force.

**IN WITNESS THEROF,** Principal and Surety have executed this Bond on the dates stated herein below.

**Part 4. Signatures and Notary. Complete all information**

By:

_____ _____ _____ _____

Principal Date Surety's Authorized Representative Date

_____ _____

Print Name Print Name/Title of Surety's Authorized Representative

_____ _____

Physical Address of Principal Physical Address of Surety

Subscribed and sworn to before me this the _____ day of _____, 20_____.

_____

Notary Public

{Seal of Notary Public}

If a Power of Attorney used, a copy of the Power of Attorney or the Authorized Agent of the Surety Company must accompany the Bond.

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