SFN 2933 (4-2025)

Bond Number

PRINICIPAL			
Name			
Physical Address	City	State	ZIP Code
SURETY			
Name			
Mailing Address	City	State	ZIP Code

We, the above named PRINCIPAL and SURETY are bound to the State of North Dakota in the penal sum of twenty five thousand dollars (\$25,000.00), for the payment of which we bind ourselves, jointly and severally, by this document.

The condition of this obligation is as follows: The Principal has applied for a Motor Vehicle Dealer's license to be issued upon the furnishing of this bond. If the license is issued to the Principal, said Principal will faithfully comply with all the statutes of the State of North Dakota, regulating or being applicable to the business of said dealer as a dealer in motor vehicles and indemnifying any person dealing or transacting business with said Principal to comply with any of the provisions of Title 39 of the North Dakota Century Code as amended, then this obligation to be void; otherwise, to remain in full force and effect.

Any third party sustaining injury within the terms of the bond may proceed against the Principal and Surety without making the State a party to any such proceedings.

The terms of this bond shall be continuous and constitute a new obligation in the sum of \$25,000.00 for each annual license period for which said Principal is licensed. Provided, however, that the aggregate liability of the Surety to all persons for any one annual license period shall in no event exceed the sum of \$25,000.00.

This bond may be canceled by the Surety, as to the future liability, by giving written notice by Certified Mail, addressed to the Principal at the address stated in this bond, and to the Department of Transportation, Motor Vehicle Division, Bismarck, North Dakota. Thirty (30) days after the mailing of said notice, this bond shall be null and void as to any liability thereafter arising, the Surety remains liable, however, subject to all terms, conditions, and provisions of this bond for any and all acts covered by this bond up to the date of such cancellation.

Effective This Date
Principal
By (Sign before a Notary Public or Authorized Officer)
Title
Surety
By (Sign before a Notary Public or Authorized Officer)
Title

Acknowledgement of Principal		
State of		
County of		
Signed and sworn to (or affirmed) before me on this day (month, day, ye	ear)	
Name of Notary Public or other Authorized Officer (Type or Print)	Affix Notary Stamp	
Signature of Notary Public or other Authorized Officer		
Commission Expiration Date (if not listed on stamp)		

Acknowledgement of Surety		
State of		
County of		
Signed and sworn to (or affirmed) before me on this day (month, day, ye	ear)	
Name of Notary Public or other Authorized Officer (Type or Print)	Affix Notary Stamp	
Signature of Notary Public or other Authorized Officer		
Commission Expiration Date (if not listed on stamp)		