

FLORIDA DEPARTMENT OF TRANSPORTATION
OFFICE OF MOTOR CARRIER COMPLIANCE
1815 THOMASVILLE ROAD
TALLAHASSEE, FLORIDA 32303-35750
850-488-7920, FAX 850-922-6798

SURETY BOND INFORMATION AND INSTRUCTIONS

THE ACCOMPANYING FORM MUST BE TAKEN TO AN INSURANCE AGENCY, BONDING AGENCY OR SURETY COMPANY FOR COMPLETION.

Rule Chapter 1487, Florida Administrative Code, commonly referred to as the "Bond Rule", establishes procedures for the payment of civil penalties and fee assessments for commercial motor vehicles which violate the statutory provisions for weight, load, size, safety, vehicle registration, and fuel taxes, in accordance with applicable sections of Chapter 316, Florida Statutes. Penalties and fee assessments are cited by officers and inspectors of the Florida Department of Transportation, Motor Carrier Compliance Office, on the following documents:

- 1) Load Report and Field Receipt
(Form 509-13)
- 2) Safety Report and Field Receipt
(Form 509-23)
- 3) IRP Trip Permit & Temporary Fuel Use Permit
(Form HSMV-85052)

Penalties and fees imposed upon vehicles are due and payable upon the issuance of a citation or a permit. Penalties and fees not guaranteed by a Surety Bond must be paid to the officer or inspector issuing the citation or permit prior to further operation of the vehicle on the roads of this State. Payment may be in cash, by cashier's check or by money order. Company checks may be accepted when a proper Surety Bond is on file. When a Surety Bond has been properly filed and accepted by the Department, a citation and/or permit will be issued to the owner or driver of the vehicle, and the vehicle will be allowed to proceed. Payment must be remitted to the officer or inspector who issued the citation or permit within ten (10) working days of the date of issuance.

The Surety Bond filed with the Department is to guarantee payment of penalties and fees. The minimum face amount of a Surety Bond required for persons or firms holding special permits is Ten Thousand Dollars (\$10,000); for all other persons and firms, the minimum face amount of a Surety Bond is Seven Thousand Dollars (\$7,000). The Surety Bond shall be payable to the Governor of the State of Florida; underwritten by a Surety authorized by the Florida Department of Insurance to do business in this State; and must bear the signature or countersignature of a Florida resident agent of the Surety. The bond shall guarantee payment of penalties and fees incurred by the insured up to the face amount of the bond. When properly filed and accepted, the

bond will become effective fifteen (15) days after actual receipt by the Director. Notice will be provided to the Principal acknowledging receipt of the bond and stating the effective date.

An association may file a bond to guarantee payment of penalties and fees assessed against vehicles operated by its members. The face amount of the bond must be the greater of Ten Thousand Dollars (\$10,000) or the average monthly penalties and fees assessed against the aggregate membership during the last fiscal year. A list of participating members must be provided at the time the bond is filed. The association must notify the Director at the address on the face of the bond by certified mail, return receipt, of any additions or deletions to the membership covered by the bond at least thirty (30) days prior to any change in membership status becoming effective.

The Department must be provided thirty (30) days notice prior to the amendment, cancellation or non-renewal of any Surety Bond. Notice must be sent to the Director at the address on the face of the bond by certified mail, return receipt, and the 3-day notice period shall commence on the date of actual receipt of the notice by the Director. Any amendment, cancellation or non-renewal of a Bond shall not affect any liability incurred or accrued prior to the effective date of the amendment, cancellation or non-renewal.

If a Principal fails to comply with the penalty and fee payment procedure and causes payment to be made by the Surety, the Department may thereafter refuse to allow the payment of penalties and fee assessments.

In the event the face amount of the bond is exceeded by the amount of the penalties and fees assessed or by an aggregate of penalties and fees assessed against the Principal, the bond shall be rendered invalid and payment shall be due and payable upon the issuance of the citation or permit.

IMPORTANT

Submission of an improper bond or a bond without necessary documents and/or information will result in delaying the effective date of the bond. Upon completion of a Surety Bond, the yellow copy should be retained by the Surety or Insurance Agent, the pink copy should be

FLORIDA DEPARTMENT OF TRANSPORTATION
OFFICE MOTOR CARRIER COMPLIANCE
1815 THOMASVILLE ROAD
TALLAHASSEE, FLORIDA 32303-5750
850-488-7920, FAX 850-922-6798

retained by the Principal or Owner, and the ORIGINAL BOND with the original POWER OF ATTORNEY, and the CONTACT INFORMATION FORM MUST BE MAILED to the address above .

* CONTACT INFORMATION FORM – contains names and telephone numbers of persons (employed by the Principal) who can verify equipment and drivers. The contacts must be available during normal business hours (8am – 5pm ET) and any time vehicles covered by the bond may operate before or after such business hours on Florida highways .

NEW SURETY BONDS, ALL CANCELLATIONS, ALL REINSTATEMENTS, AND ALL RIDERS AMENDING ANY INFORMATION ON AN ORIGINAL BOND MUST BE MAILED TO THIS OFFICE AT THE ADDRESS ABOVE. Renewals and Continuatsins are not required, but may be filed with this office. Additionally, this office must be notified of any change of address .

FLORIDA DEPARTMENT OF TRANSPORTATION
OFFICE MOTOR CARRIER COMPLIANCE
1815 THOMASVILLE ROAD
TALLAHASSEE, FLORIDA 32303-5750
850-488-7920, FAX 850-922-6798

INSTRUCTIONS FOR COMPLETION OF SURETY BOND (FORM 509-21)

1)	Enter bond number assigned by the Surety .
2)	LEAVE BLANK- TO BE COMPLETED BY MOTOR CARRIER COMPLIANCE
3)	Enter Principal 's name .
4)	Enter Principal 's telephone number, including area code .
5)	Enter Principal 's mailing and physical addresses, including zip code .
6)	Enter Surety company 's name .
7)	Enter Surety company 's address, including zip code, to which correspondence regarding the bond should be mailed .
8)	Enter the state in which the Surety is incorporated .
9)	Spell out the dollar amount for which Principal is being bonded . (Example: "SEVEN THOUSAND" or "TEN THOUSAND")
10)	Enter numerical amount for which Principal is being bonded . (Example: "7,000" or "10000")
11)	a. Enter date of current month . b. Enter current month . c. Enter current year .
12)	Enter Principal 's name as it appears on Line #3 .
13)	Obtain signature of the President (if Principal is a corporation), Executive Director (if Principal is an association), or Owner (if Principal is an individual) .
14)	Obtain signature of the Secretary, Assistant Secretary or other Officer (if Principal is a corporation or an association), or a Witness to the Owner 's signature (if Principal is an individual) .
15)	Enter Surety company name as it appears on Line #6 .
16)	Signatures of Surety 's authorized representative executing the Bond .
17)	Obtain signature of Florida Resident Agent of Surety .

****COMPLETED BOND (ORIGINAL) MUST BE MAILED TO ADDRESS ABOVE.****

FLORIDA DEPARTMENT OF TRANSPORTATION
OFFICE MOTOR CARRIER COMPLIANCE
1815 THOMASVILLE ROAD
TALLAHASSEE, FLORIDA 32303-35750
850-488-7920, FAX 850-922-6798

CONTACT INFORMATION FORM

Submission of an improper bond or a bond with necessary documents and/or information will result in delaying the effective date of the bond. Upon completion of a Surety Bond, the yellow copy should be retained by the Surety or Insurance Agent, the pink copy should be retained by the Principal or Owner, and the **ORIGINAL BOND WITH THE ORIGINAL POWER OF ATTORNEY MUST BE MAILED TO THE ADDRESS ABOVE.**

Names and telephone numbers of persons (employed by the Principal) who can verify equipment and drivers must be provided. These contacts must be available during normal business hours (8a -5pm ET) on any time vehicles covered by the bond may operate before or after such business hours on Florida highways.

NEW SURETY BONDS, ALL CANCELLATIONS, ALL REINSTATEMENTS, AND ALL RIDERS AMENDING ANY INFORMATION ON AN ORIGINAL BOND MUST BE MAILED TO THIS OFFICE AT THE ADDRESS ABOVE. Renewals and Continuations are not required, but may be filed. This office must be notified of any change of address.

Copies of this form may be made and used in the future for updating information on file with this office when a change of address occurs or when contacts and/or telephone numbers change.

PRINCIPAL INFORMATION:	
NAME:	
PHYSICAL ADDRESS:	
CITY/STATE/ZIP:	
MAILING ADDRESS:	
CITY/STATE/ZIP:	

CONTACT NAME(S):	TELEPHONE NUMBER(S):

SURETY INFORMATION:	
NAME:	
MAILING ADDRESS:	
CITY/STATE/ZIP:	
TELEPHONE NUMBER:	

INSURANCE AGENT INFORMATION:	
NAME:	
MAILING ADDRESS:	
CITY/STATE/ZIP:	
TELEPHONE NUMBER:	