

MOTORCYCLE SCHOOL BOND

MV3765 4/2009

Wisconsin Department of Transportation

Owner Name	
School Name	
School Address	
Surety Company Name	
Surety Company Address	
Bond Amount	Bond Number

The above-named owner as principal and the above-named company as surety, are firmly bound to the Wisconsin Department of Transportation for the benefit of any person aggrieved under the provisions of Chapter Trans 129 Wisconsin Administrative Code.

The condition of this obligation is that the above-named principal has applied for, or has been granted, approval to do business as a Motorcycle School pursuant to Subchapters I and IV of Chapter 343 Wisconsin Statutes, or any successor statutes subsequently amended or created, and pursuant rules and regulations.

The amount of this bond is the sum stated above in lawful money of the United States of America.

If the owner complies with all the provisions of Chapter Trans 129 Wisconsin Administrative Code, the bond obligation shall be void.

Liability under this bond shall be continuous in nature. In the event of renewal for one or more annual periods, the liability of the surety shall not be cumulative. Regardless of the number of years that this bond is continued, or the number of annual premiums that is paid or payable, the aggregate liability of the surety during the entire period in which this bond is in force shall not exceed the stated amount of this bond.

This bond may be terminated by surety giving thirty (30) days written notice to the Wisconsin Department of Transportation. In the event of termination, the surety shall be relieved of liability only with respect to breaches of condition occurring on and after the effective termination date.

In witness, principal and surety have signed this bond.

(Effective Date)

X _____
(Witness to Principal Signature)

(Principal School Name)

X _____
(Witness to Principal Signature)

X _____
(Signature of Authorized School Representative, Title)

X _____
(Witness to Surety Signature)

(Surety Company Name)

X _____
(Witness to Surety Signature)

X _____
(Signature of Surety Officer, Attorney-in-Fact)

The address for filing and giving notice is Wisconsin Department of Transportation, PO Box 7917, Madison, WI 53707-7917