

# TOBACCO WEIGHPERSON BOND

BOND TYPE: \_\_\_ BLANKET \_\_\_ INDIVIDUAL

BOND NO. \_\_\_\_\_

**KNOW ALL MEN BY THESE PRESENTS** that we \_\_\_\_\_  
of \_\_\_\_\_ as principal and \_\_\_\_\_  
a corporation of the State of \_\_\_\_\_ with its home office operated in the city of \_\_\_\_\_  
\_\_\_\_\_, State of \_\_\_\_\_ hereinafter  
called the Surety, are held and firmly bound unto the Commonwealth of Kentucky, Department of Agriculture, Division of  
Regulation & Inspection, in the penal sum of \_\_\_\_\_ for the payment of which, well and truly to be made, the  
said \_\_\_\_\_ as principal and \_\_\_\_\_ as surety bind  
themselves, their heirs, executors, administrators, successors and assignees firmly by these presents.

**WHEREAS,** \_\_\_\_\_ of \_\_\_\_\_  
(Tobacco Warehouse) (Address)

\_\_\_\_\_ has designated \_\_\_\_\_  
to the Department of Agriculture, Division of Regulation & Inspection, of the Commonwealth of Kentucky as a weighperson  
in the \_\_\_\_\_  
(Tobacco Warehouse)

and in accordance with the provisions of KRS 248.410 which requires by law the filing of bond as hereinafter provided.

**NOW THEREFORE,** the condition of this obligation is such that if the \_\_\_\_\_  
\_\_\_\_\_ on and after the \_\_\_\_\_ day of \_\_\_\_\_,  
(year) \_\_\_\_\_ shall faithfully perform all of his/her duties as weighperson, then this obligation shall be void, otherwise in full  
force and effect.

**PROVIDED HOWEVER,** that this bond is executed and accepted subject to the following express conditions:

1. The liability of the Surety on Account of the person covered by this bond shall not exceed the amount designated in said bond.
2. Either the Surety or the Department of Agriculture, Division of Regulation & Inspection may terminate this bond by written notice service upon the other or sent by registered mail and specifying therein the effective date of such termination. Such date if the notice be served by the Surety, shall not be less than thirty (30) days after the date of such service.
3. **The Surety on Account of person covered by this bond shall provide the Department of Agriculture, Division of Regulation & Inspection with annual written verification that the renewal premium has been paid and the bond remains in full force.**

**SIGNED AND SEALED THIS** \_\_\_\_\_ day of \_\_\_\_\_, (year) \_\_\_\_\_

Principal Name \_\_\_\_\_ Agency Name \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Surety Name \_\_\_\_\_

Signature \_\_\_\_\_