

**South Carolina Workers' Compensation Commission
SELF-INSURANCE DIVISION**

1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
(803) 737-5704



BOND NUMBER: _____

KNOW ALL MEN BY THESE PRESENTS that _____, a corporation incorporated under the laws of the State of _____, as Principal, and _____ SSSSSSSS _____, a corporation incorporated under the laws of the State of _____, as Surety, are held and firmly bound to the State of South Carolina in the sum of _____ dollars, to be paid to the State of South Carolina binding ourselves, our successors and assigns jointly and severally by this document, signed, sealed and dated this _____ day of _____, A.D. _____.

WHEREAS, _____ did file with the South Carolina Workers' Compensation Commission its application for the privilege of paying compensation directly without insuring under South Carolina Code 42-5-20 (1985).

AND WHEREAS, the Commission on the _____ day of _____, A.D. _____, passed an order granting privilege continuously until cancelled upon condition that _____, employer, enter into bond in the penalty of _____ dollars and shall abide by the requirements of the Act with reference to paying or furnishing compensation, medical or surgical services, etc., and the rules and regulations that are now or may be adopted by the Commission.

This bond shall take effect at 12:01 a.m. on the _____ day of _____, A.D. _____ and shall remain in effect continuously until cancelled.

NOW, THEREFORE, the condition of this obligation is such that _____ shall abide by and perform all of the requirements of the Act and any amendments, as well as the rules and regulations that are or may be adopted by the South Carolina Workers' Compensation Commission respecting the payment of compensation to its injured employees or the dependents of its killed employees, and the furnishing at its own cost the expenses of medical, surgical and other services, and funeral expenses as provided in the Act, then this obligation shall be void.

This Bond may be cancelled at any time by the Surety upon giving sixty (60) days written notice to the South Carolina Workers' Compensation Commission, in which event the liability of the Surety shall, at the expiration of sixty days, cease and determine, except as to such liability of the Principal on account of injury or death to any of its employees, as may have accrued prior to the expiration of sixty days, it being understood that the Surety shall be liable, within the penal sum mentioned above, for the default of the Principal in fully discharging any liability on its part.

IN WITNESS, the employer has caused this document to be signed by its President, and its corporate seal attached, attested by its Secretary, and the Surety has likewise caused this document to be signed by its President, and its corporate seal attached, attested by its Secretary.

Attest:

Witness as to Principal

Employer
By

President

Address of Witness

Attest:

Witness as to Surety

Surety

By

President or Authorized Officer of Surety Company

Address of Witness

I, _____, Secretary of the employer corporation, certify that the resolution adopted on the _____ day of _____, A.D. _____, the Board of Directors of the employer aforementioned directed and empowered the execution of this bond. In witness sign and affix my official seal.

Secretary



STATE OF SOUTH CAROLINA} PROBATE WHERE EMPLOYER IS CORPORATION _____ County

BEFORE ME, personally appeared _____ and swore that he saw _____, as principal,
_____, sign, seal and deliver the Bond, and he subscribed his name as a witness.

SWORN and subscribed before me this _____ day of _____, A.D. _____.

Notary Public

STATE OF SOUTH CAROLINA} PROBATE WHERE EMPLOYER IS INDIVIDUAL OR PARTNERSHIP

BEFORE ME, the subscribing Notary Public, personally appeared _____ and swore that he saw
_____, as principal, _____ sign, seal and deliver the Bond, and he
subscribed before me this _____ day of _____, A.D. _____.

Notary Public

STATE OF SOUTH CAROLINA} PROBATE AS TO SURETY _____ County

BEFORE ME, the subscribing Notary Public, personally appeared _____ and swore that he saw
_____, by _____ as Attorney in Fact, as Surety, sign, seal and deliver the
Bond, and he subscribed his name as a witness.

SWORN and subscribed before me this _____ day of _____, A.D. _____.

Notary Public