



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

HEARING INSTRUMENT FITTERS AND DISPENSERS SURETY BOND COVER PAGE INSTRUCTIONS

DOCUMENTS SUBMITTED WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED FORM

1. PRINCIPAL NAME – Provide the name of the business entity that is engaged in the fitting and dispensing of hearing instruments and is covered by the surety bond.
2. PRINCIPAL PRIMARY ADDRESS – Provide the primary address of the Principal. This address should be the same as the address listed on the surety bond.
3. SURETY NAME – Provide the name of the company issuing the surety bond.
4. SURETY PRIMARY ADDRESS – Provide the primary address of the company issuing the surety bond. This address should be the same as the address listed on the surety bond.
5. SURETY BOND NUMBER – Provide the surety bond number.
6. EFFECTIVE DATE – Provide the date the surety bond became effective.
7. LICENSEES COVERED UNDER BOND – List the licensees employed by the business entity (Principal) who are covered under this surety bond. Provide each licensee's name and license number. Attach additional pages if necessary.

SEND YOUR COMPLETED FORM TO:

Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted will not be returned. Keep a copy of your completed document.

For additional information and questions, visit the [TDLR website](http://www.tdlr.texas.gov) or reach Customer Service via [webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 (in state only), (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.

TDLR Public Information Act Policy:

This document is subject to the Texas Public Information Act. With certain exceptions, information in this document may be made available to the public. For more information, view the [TDLR Public Information Act Policy](#).



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PRINCIPAL INFORMATION

1. Principal Name:

Business Entity Covered by the Surety Bond

2. Principal Primary Address:

P O Box, Number, Street Name/Suite Number

City

State

Zip Code+4

SURETY INFORMATION

3. Surety Name:

Company Issuing Surety Bond

4. Surety Primary Address:

P.O. Box, Number, Street Name/Suite Number

City

State

Zip Code+4

BOND INFORMATION

5. Bond #:

6. Effective Date:

Month/Day/Year

7. LICENSEES COVERED UNDER THE BOND

Licensee Name

License Number



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HEARING INSTRUMENT FITTERS AND DISPENSERS SURETY BOND

THE STATE OF TEXAS

COUNTY OF

Bond Number:

KNOW ALL MEN BY THESE PRESENTS:

That we, _____, as PRINCIPAL,
(Principal's Name)

whose address is _____, and
(Principal Address, City and State)

_____, as SURETY,
(Surety's Name)

being a surety company authorized to do business in the State of Texas, are held and firmly bound unto the Texas Department of Licensing and Regulation, as OBLIGEE, in the penal sum of TEN THOUSAND DOLLARS (\$10,000.00), lawful money of the United States of America, to be paid to the OBLIGEE for the benefit of the State of Texas and its political subdivisions and for the benefit of judgment holders, for which payment well and truly to be made, we bind ourselves and our legal representatives, heirs, executors, administrators, successors and assigns, jointly and severally by these presents.

The conditions of the above obligations are such that:

WHEREAS, the PRINCIPAL or its employee is applying for or holds a license as a Hearing Instrument Fitter and Dispenser in the State of Texas, pursuant to Chapter 402, Texas Occupations Code.

WHEREAS, the PRINCIPAL is required to provide this bond to the Texas Department of Licensing and Regulation pursuant to Chapter 402, Texas Occupations Code and the rules under 16 Texas Administrative Code Chapter 112.

NOW, THEREFORE, if the PRINCIPAL shall pay all (1) taxes and contributions owed to the State of Texas and its political subdivisions by the PRINCIPAL, and (2) judgments that the PRINCIPAL may be required to pay for negligently or improperly dispensing hearing instruments or for breaching a contract related to the dispensing of hearing instruments, then this obligation shall be void, otherwise to remain in full force and effect.

This Bond is subject to the following conditions:

1. This bond shall be in full force and effect on _____, 20____.
(Month, Day, and Year)
2. This bond shall be continuous until cancelled by action of the SURETY, the PRINCIPAL, or the OBLIGEE.
3. The SURETY may cancel this bond by giving written notice to the PRINCIPAL and the OBLIGEE not later than thirty (30) days before the date of cancellation.
4. This bond is open to successive recovery but in no event shall the SURETY'S liability for all claims under this bond exceed the penal sum of the bond.
5. No person may commence an action on this bond later than the third anniversary of the date this bond is cancelled.

Signed, Sealed and Dated this

day of

, 20 .

FOR PRINCIPAL

FOR SURETY

(Business Name of PRINCIPAL)

(Business Name of SURETY)

By:
(Signature of Authorized Representative)

By:
(Signature of Authorized Representative)

(Printed or typed name of Authorized Representative)

(Printed or typed name of Authorized Representative)

(Title of Authorized Representative)

(Title of Authorized Representative)

(Business Address)

(Business Address)

(City/State/Zip Code)

(City/State/Zip Code)

(Business Telephone Number)

(Business Telephone Number)