



STATE OF DELAWARE  
DEPARTMENT OF FINANCE  
DIVISION OF REVENUE  
CARVEL STATE BUILDING  
820 N. FRENCH STREET  
P.O. BOX 8911  
WILMINGTON, DE 19899-8911

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FED ID OR SSN: \_\_\_\_\_

**Attention License Department:**

Taxpayer(s) does not have any contract(s) that accumulate over \$20,000.00 at this time, nor does (s)he foresee any in the near future.

When the taxpayer(s) comes to the point in time where their contract(s) have accumulated to over \$20,000.00, the taxpayer is aware and will fulfill the bonding requirements.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date