

COMMERCIAL DRIVER LICENSE THIRD PARTY TESTER BOND

Tester Name:	
Company Name:	
Company Address, City, State, ZIP Code:	
Surety Company Name:	
Surety Company Address, City, State, ZIP Code:	
Bond Amount: \$25,000	
Bond Number:	Effective Date:
Department of Motor Vehicles for reimbursement for relicense (CDL) Third Party Tester or one or more of its Exskills testing for applicants for a CDL under the provision 49 CFR Parts 383 and 384 of the Federal Motor Carrier States and Tester has applied for, or has been granted applied. Neb.Rev.Stat. § 60-4,158 and Title 247 NAC 8 of the Nesubsequently amended or created, and pursuant rules above in lawful money of the United States of America Liability under this bond shall be continuous in nature. of the surety shall not be cumulative. Regardless of the premiums that is paid or payable, the aggregate liability force shall not exceed the stated amount of this bond.	Safety Regulations. The condition of this obligation is the above roval to do business as a CDL Third Party Tester pursuant to abraska Administrative Code, or any successor statutes and regulations. The amount of the bond is the sum stated and based upon the number of CDL skills tests anticipated annuall In the event of renewal for one or more annual periods, the liability number of years this bond is continued, or the number of annual y of the surety during the entire period in which this bond is in This bond may be terminated by surety giving thirty (30) days dehicles. In the event of termination, the surety shall be relieved
Signature of Authorized Tester Representative	Signature of Surety Officer
State of	State of County of The foregoing signature of the surety was acknowledged before me this day of 20
Notary Seal	Notary Seal

