Form 3002—General Information (Health Spa Surety Bond)

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant code provisions. This form and the information provided are not substitutes for the advice and services of an attorney.

Commentary

According to Chapter 702 of the Texas Occupations Code (the "Health Spa Act"), the secretary of state may not issue a health spa operator's certificate of registration unless proof of security or exemption is filed with the application for registration. This form is designed for applicants electing to satisfy the security requirement by filing a surety bond.

The required amount of security is determined by reference to the following table:

Total amount paid for prepaid memberships at health spa location	Amount of Security
\$0-\$20,000	\$20,000
\$20,001-\$25,000	\$25,000
\$25,001-\$30,000	\$30,000
\$30,001–\$35,000	\$35,000
\$35,001–\$40,000	\$40,000
\$40,001–\$45,000	\$45,000
Over \$45,000	\$50,000

Instructions for Form

- **Principal/Health Spa:** Provide the name, mailing address, and location of the health spa applying for the certificate of registration. The name of the health spa must match the name on the application for certificate of registration.
- **Bond:** Provide the number used by the financial institution to identify the bond and the amount of the bond in both words and numbers.
- **Surety:** Provide the name of the surety company. The surety company must be authorized to do business as a surety company in Texas.
- **Effective Date:** Provide the date on which the bond will become effective.
- Execution: Persons who are authorized to sign on behalf of the health spa, as principal, and the surety company must sign and date the bond.
- **Delivery Instructions:** The bond may be mailed to Registrations Unit, P.O. Box 13193, Austin, Texas 78711-3193 or delivered to the James Earl Rudder Office Building, 1019 Brazos, 1st Floor, Austin, Texas 78701.

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This space reserved for office use

Submit to: SECRETARY OF STATE Registrations Unit P O Box 13193 Austin, TX 78711-3193 512-475-0775 512-475-2815 - Fax Filing Fee: None.



PRINCIPAL/ HEALTH SPA	Name:			
	Mailing Address	City	State Zip	
	Location	City	State Zip	
BOND	Number:	Amount :		
SURETY	Name:			

We, PRINCIPAL AND SURETY identified above, our heirs, executors, successors and assigns, jointly and severally, are liable to the State of Texas, for the amount of the bond shown, in favor of the state and held for the benefit of the state and each member of the health spa who has been administratively adjudicated to have suffered actual *financial loss* as a result of the closing of the health spa. SURETY acknowledges that it is duly authorized and qualified to do business as a surety company in Texas.

This agreement is subject to the following terms and conditions:

This bond shall serve as the security required by Section 702.151, Occupations Code, so that the secretary of state may issue a health spa operator's certificate of registration to PRINCIPAL.

A member of the health spa who suffers actual *financial loss* as a result of the closing of the health spa may bring an action based on the bond and recover against the bond. "Financial loss" shall mean and be limited to any unused or unearned portion of such member's dues or fees.

As a condition of SURETY's obligation, PRINCIPAL shall faithfully discharge all obligations, duties and responsibilities under the Health Spa Act, Texas Occupations Code, Chapter 702, as that statute is presently worded, and as it may hereafter be amended to read; and all applicable rules and regulations of the secretary of state adopted to carry out the provisions of said Act.

The aggregate liability of SURETY for all breaches of bond conditions may not exceed the amount of the bond. If the claims filed against the bond exceed the amount of the bond, SURETY shall pay the amount of the bond to the secretary of state for distribution to the claimants on a pro rata basis. SURETY is relieved of liability under the bond on payment of the amount to the secretary of state.

Regardless of the number of years the bond continues in force or the number of premiums paid or payable, the limit of SURETY's liability stated in the bond shall not be cumulative from year to year or period to period. SURETY's liability is exclusively conditioned on a final administrative order issued by the secretary of state.

The bond shall be continuous until cancelled by SURETY, and cancellation by SURETY shall be upon written notice to the secretary of state not later than the 60th day before the date of cancellation. The bond shall be maintained until two years after the date on which the health spa ceases business or until the secretary of state determines that each claim to which the bond is subject has been satisfied or foreclosed by law. SURETY shall not be liable for any claim brought or suit filed against the bond if the claim or filing of a suit occurs more than two years from the last effective date of the bond.

	It is agreed that the bond	shall be in full force and	l effect as of the following da	te:
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Date:		
	Signature of authorized person for PRINCIPAL	
Data	Printed or typed name of authorized person for PRINCIPAL	
Date:	Signature of authorized person for SURETY	
	Printed or typed name of authorized person for SURETY	

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