

# GEN-BR

## Surety Bond Rider - Tax Liability Rider or Name Change Rider

AMENDING BOND NO. \_\_\_\_\_

\_\_\_\_\_, (“Principal”) and \_\_\_\_\_, (“Surety”),  
previously executed a surety bond effective \_\_\_\_\_ in favor of North Carolina,  
as obligee. The surety bond was issued under the bond number identified above, remains in effect, and is applicable to tax liability for:

- Alcoholic Beverages    Tobacco Products Cigarettes    Tobacco Products Other Than Cigarettes    Motor Fuel/Alternative Fuel.

The bond identified above is amended as follows:

Change Tax Liability (Bond) Amount

The previously issued bond is hereby amending by increasing or decreasing the bond amount from the sum of USD \_\_\_\_\_ (US\$ \_\_\_\_\_) to the sum of USD \_\_\_\_\_ (US\$ \_\_\_\_\_).

The amended bond amount is applicable to acts or omissions on or after the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Change Name of Principal

The previously issued bond is hereby amended by changing the name of the Principal from:  
\_\_\_\_\_ to \_\_\_\_\_.  
(Previous Name) (New Name)

The amended Principal’s name is effective the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

This rider will become a part of the bond and does not waive, alter, modify, or terminate any other terms of the bond. Principal or Surety shall send this rider to the North Carolina Department of Revenue for approval after it has been executed.

Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

SURETY NAME		PRINCIPAL NAME	
SURETY REPRESENTATIVE SIGNATURE (SEAL) X		PRINCIPAL REPRESENTATIVE SIGNATURE (SEAL) X	
SURETY REPRESENTATIVE PRINTED NAME As Attorney in Fact		PRINCIPAL REPRESENTATIVE PRINTED NAME	TITLE
SURETY	PRINCIPAL	NOTARY (IF NO SEAL FOR PRINCIPAL)	
<input type="checkbox"/> Surety declares that the surety’s seal is affixed to this form.  	<input type="checkbox"/> Principal declares that its seal is affixed to this form.  	<input type="checkbox"/> Principal has not affixed seal; Principal’s signature has been notarized below. State of _____ County of _____ This instrument was acknowledged before me on _____ (date) by _____ (name of person acknowledging). _____ Signature of Notary Public _____ Printed Name of Notary Public _____ My Commission expires _____ 	