

STATEWIDE BAIL BONDS LLC INDEMNITOR APPLICATION AND AGREEMENT

NAME _____

DEFENDANT NAME _____

ALIAS _____

BOND AMOUNT \$ _____

DATE OF BIRTH _____

RELATIONSHIP TO DEFENDANT _____

SOCIAL SECURITY # _____

LENGTH OF RELATIONSHIP _____

HOME # () _____ CELL # () _____ WORK # () _____

RESIDENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

RESIDENT STATUS RENT OWN LIVE WITH _____ LENGTH AT ADDRESS _____

EMPLOYMENT INFORMATION

COMPANY NAME _____ LENGTH OF EMPLOYMENT _____

COMPANY ADDRESS _____ CITY _____ STATE _____ ZIP _____

Full time Part time Social security Retired Disabled Other _____ WORK HOURS _____

DRIVER INFORMATION

AUTO YEAR _____ MAKE _____ MODEL _____ COLOR _____ PLATE _____

LIEN HOLDER _____ ID OR LICENSE # _____ STATE _____

EMERGENCY CONTACT INFORMATION

NAME _____ ADDRESS _____ PHONE # _____

PERSONAL REFERENCE

NAME _____ ADDRESS _____ PHONE # _____

NAME _____ ADDRESS _____ PHONE # _____

BELOW ARE THE OBLIGATIONS OF THE INDEMNITOR PLEASE READ AND UNDERSTAND THIS DOCUMENT BEFORE SIGNING

On this the _____ day of _____ 2010, I hereby obtain a surety bond, for the release of a Defendant through Statewide Bail Bonds LLC under the following TERMS:

- If bond is put into default status for non-payment of premium Statewide Bail Bonds LCC had the right to revoke & arrest the defendant
- The defendant appearing in court each and every time they are so ordered.
- Payments of court costs for non-appearance or if the defendant fails to follow all instructions or should the court forfeit bond.
- Payment of any unpaid premium if defendant fails or is unable to pay.
- If it becomes necessary to apprehend and surrender the defendant to the court and all expenses incurred as a result of forfeiture
- If a forfeiture occurs, I give Statewide Bail bonds LLC and/or its agents the right to search any residence of mine or place of residence know to be occupied by me for said defendant, and id defendant is not surrendered with in time prescribed by law, I will pay the full amount of the bond, including unpaid premium, attorney fees, court costs, interest and investigators fees.
- Statewide Bail Bonds LLC must be notified within 72 hours of any change of address or telephone number for cosigners and defendant

SIGNATURE _____