

Fill out

Everything Today's Date: 1/10

(10)

PERSONAL INFORMATION FORM

Note: Completion of this form is required. It is important that the responses are true, accurate and complete.

Full Name: Last _____, First _____, Middle _____

Maiden Name/AKA _____ Roommates _____

Address _____ Apt# _____ City _____ State _____ Zip _____

Buying or renting _____ How long _____ How long in So. Calif. _____

Balance owed _____ Down Pymt _____ Market Value _____ 2nd Mtg? _____

Phone# _____ Message# _____ Cell# _____ Pager# _____

Driver License _____ SS# _____ Email _____

What other states have you lived in? _____ When? _____

List Previous address (if less than 5 years) _____

Name of Bank _____ Avg. Balance Checking _____ Savings _____

Autos: _____ (year, make, model, color, license#)

Employer _____ Phone # _____ How long _____

Employer address _____ City _____ State _____ Zip _____

How many children? _____ Ages _____

References/Family Information:			
Name	Address	Phone#	Occupation
Spouse	_____	_____	_____
Mother	_____	_____	_____
Father	_____	_____	_____
Brother	_____	_____	_____
Sister	_____	_____	_____
Reference	_____	_____	_____
Reference	_____	_____	_____
Reference	_____	_____	_____
Attorney	_____	_____	_____

Pls fill out Booking#

Sex _____ Height _____ Weight _____ Eyes _____ Hair _____ Race _____ Citizenship _____ Dob _____

(Handwritten marks and scribbles)

2.

DATE: _____

AMOUNT OF BOND: _____ PREMIUM _____

BOND NUMBER: _____ COMPANY: _____

I understand in signing this bond for obtaining the release of

I am responsible for him/her appearing in Court each time he/she is so ordered; also I understand I am responsible for payment of any court costs for non-appearance if he/she fails to follow any and all instructions or orders of the Court or forfeits this bond, and it becomes necessary to apprehend and surrender him/her to the Court, I understand I am responsible for any and all expenses incurred as a result of such forfeiture and further, if such a forfeiture occurs and defendant is not surrendered to the Court within time prescribed by law, I understand I am required to pay the FULL AMOUNT of the bond posted, including unpaid bail premium, if applicable in this state. Should state laws supersede this or any part of the agreement, all other terms are still in full force and effect in accordance with all of the terms of the Bail Agreement of even date herewith.

COLLATERAL cannot be returned until such time as the Company receives written notice from the clerk of the court.

I am not a paid signer. I have no connection with a Bail Bond Consultant.

I have read the above contract and understand it, and agree to fulfill ALL the provisions therein.

SIGNED: (Signature)
Print



AGENT: _____
