

Sorry for the inconvenience we no longer accept American Express cards

SUNSHINE STATE BAIL BONDS
1465 NW NORTH RIVER DRIVE
MIAMI, FL 33125
Phone: 305) 325-8655
Fax: 305) 325-0073

Fax

To: _____ **From:** _____

Fax: _____ **Date:** _____

Phone: _____ **Pages:** _____

Re: _____ **CC:** _____

Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

Sorry for the inconvenience we no longer accept American Express cards

CREDIT CARD AUTHORIZATION

1466 NW NORTH RIVER DRIVE
MIAMI, FLORIDA 33125

DATE: _____

AGENT: _____

CARD HOLDER INFORMATION:

LAST NAME: _____ FIRST NAME: _____
 ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 TELEPHONE NO.: _____ IDENTIFICATION NO.: _____
 CREDIT CARD NO.: _____ EXPIRATION: _____
 CID: _____ (THESE ARE THE THREE DIGITS LOCATED IN BACK OF THE CARD)

DEFENDANT INFORMATION:

LAST NAME: _____ FIRST NAME: _____
 JAIL LOCATION: _____ BOND AMOUNT: \$ _____

CHARGES / FEES(S)

PREMIUM: \$ _____
 MISC. FEES: \$ _____
 COLLATERAL: \$ _____
 TOTAL: \$ _____

THE ISSUER OF THE CARD IDENTIFIED ON THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS "TOTAL" UPON PROPER PRESENTATION. I PROMISE TO PAY SUCH "TOTAL" (TOGETHER WITH ANY OTHER CHARGES DUE THEREON) SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT GOVERNING THE USE OF SUCH CARD

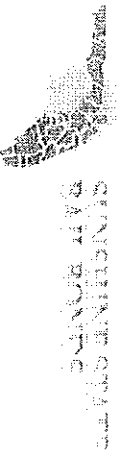
SIGNATURE: _____

PRINT NAME: _____

| |
|---|
| AUTHORIZATION CODE: _____ _____ _____ |
|---|

Sunshine State Bail Bonds' Credit Card Fees

The following fee of 3.5% will be imposed on all collateral taken on credit cards (rates subject to change) as stated in Florida Statutes 648.571 3(b).



SUNSHINE STATE
BAIL BONDING

Date: _____

INDEMNITOR APPLICATION

Payee Information

Full Name: _____ Tel: _____ Cell: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

How long have you lived at current address?: _____ Years _____ Months. Do you Own Rent Other (Specify) _____

Name of Mortgage Co./ Landlord: _____ Address: _____

Drivers License No. _____ Social Security No. _____ Date of Birth : _____

Your Occupation: _____ Name of Company _____ Business Phone: _____

Marital Status: _____ If Applicable, Spouse Name: _____ Tel: _____

Personal References:

~~1. Name: _____ Tel: _____
Address: _____ City: _____ State: _____ Zip: _____~~

~~2. Name: _____ Tel: _____
Address: _____ City: _____ State: _____ Zip: _____~~

~~3. Name: _____ Tel: _____
Address: _____ City: _____ State: _____ Zip: _____~~

Collateral Provided: _____

Premium Paid: \$ _____ If Any Balance: _____ Paid by Cash Credit Card Money Order Cashier Check

I HEREBY CERTIFY THAT I have provided the above information and freely and voluntarily accept the responsibility as the Indemnitor for the below named Defendant to personally appear in the designated Court on the date and at the time set by the Court. I understand that in the event that Defendant fails to appear in court as required and is not surrendered within SIXTY (60) DAYS, I will be personally responsible to SUNSHINE STATE BAIL BONDS for the full amount of the Surety Bond.

Defendant: _____ Indemnitor _____
Power No(s): _____

Print Name _____

Witness _____

INDEMNITY AGREEMENT FOR SURETY BAIL BOND

The undersigned called "First Party," makes application to _____ called "Second Party" for execution by _____ a corporation called "Surety," of a Bail Undertaking herein referred to as "Bail Bond" in the penal amount of \$ _____ called for _____

"Principal," and in consideration of Second Party arranging for execution of continuance of this Bail Bond, First Party does jointly and severally agree as follows:

FIRST. To pay Second Party \$ _____ Premium for this Bail Bond. The premiums earned upon the release of Principal. The fact that Defendant may have been improperly arrested, or his bail reduced or his case dismissed, shall not obligate the return of any portion of said premium.

SECOND. To reimburse Second Party and Surety for actual expenses incurred and caused by a breach by the Principal of any of the terms for which the application and Bail Bond were written including expenses or liabilities incurred as a result of searching for, recapturing or returning Principal to custody, incurred by Second Party or Surety or as necessary in apprehending or endeavoring to apprehend Principal, including legal fees incurred by Second Party or Surety in making application to a court for an order to vary or to set aside the order of forfeiture or Judgment entered thereon.

THIRD. To pay the Second Party or Surety, in the event that it is necessary for them to institute suit for a breach of this agreement, a reasonable attorney's fee which shall, in no event, be less than the sum of twenty-five dollars (\$25.00).

FOURTH. To pay Second Party or Surety as collateral upon demand the penal amount of Bail Bond whenever Second Party or Surety, as a result of information concealed or misrepresented by the First Party or Principal or other reasonable cause, any one of which was material to hazard assumed, deems payment necessary to protect the Second Party or Surety hereunder. Where, as a result of judicial action, bail has been increased, and no collateral or insufficient collateral, in the sole discretion of Second Party or Surety, is furnished to indemnify against such increase in the bail, Second Party or Surety may demand such collateral as will indemnify them against such increased bail.

FIFTH. To pay Second Party or Surety immediately upon demand after entry of Estreasure pursuant to governing statutes.

SIXTH. To aid Second Party or Surety in securing release or exoneration of Second Party or Surety from all liability under Bail Bond, including the surrender of Principal to Court should Second Party or Surety deem such action advisable.

SEVENTH. That all money or other property which the First Party has deposited or may deposit with the Second Party or Surety may be applied as collateral security or alternately for moneys claimed herein, and to accomplish the purposes contained herein, the Second Party and/or Surety is authorized to lawfully levy upon said collateral in the manner provided by law and to apply the proceeds therefrom and any and all money deposited to payment or reimbursement for the hereinabove liabilities, losses, costs, damages and expenses. If collateral received by second Party is in excess of the bail forfeited, such excess shall be returned to the depositor immediately upon the application of the collateral to the forfeiture, subject to any claim of Second Party and Surety for unpaid Premium or the hereinabove charges.

EIGHTH. The obligations hereunder are joint and several and any amounts due shall bear interest at the maximum rate of interest allowed by law. The Second Party and the Surety shall not be first obliged to proceed against the Principal on Bail Bond before having recourse against the First Party or any one of them, the First Party hereby expressly waiving the benefits of law requiring the Second Party or the Surety to make claim upon or to proceed or enforce its remedies against the Principal before making demand upon or proceeding and/or enforcing its remedies against any one or more of the First Party.

NINTH. In making application for Bail Bonds each of us warrants all statements made by him or her on the application to be true, and we agree to advise Second Party or Surety of any change, including but not limited to change of address or employment of either the Principal or of any of the First Party, or any other material change in circumstances, within forty-eight (48) hours after knowledge such change shall have occurred, and the First Party agrees that any failure to so notify shall be reasonable cause for the immediate surrender of the Principal.

TENTH. The undersigned agrees that these obligations apply to all other Bail Bonds executed for the same charge for which the above mentioned Bail Bond was executed, or any charge arising out of the same transaction regardless of whether said Bail Bonds are then before or after conviction, including appeals, but not in a greater amount.

For good and valuable consideration, the undersigned principal hereby agrees to indemnify and/or hold harmless, the surety company or its agent for any and all losses not otherwise prohibited by law, or rules and regulations promulgated under any applicable statute.

EL EVENTH. For good and valuable consideration, the undersigned principal agrees to indemnify and hold harmless the surety company or its agent for all losses not otherwise prohibited by law or by rules of the Department of Insurance.

IN WITNESS WHEREOF, the First Party whose names are subscribed to the Bail agreement executed herewith each represents I have read the Bail Agreement and I know the contents thereof, that I hereby acknowledge receipt of a copy of said Bail Agreement, that I am the true and lawful owner of the property, whether real or personal, which is set forth in the Application for Bail (which Application is made a part hereof by reference as though herein fully set forth) is my property and that I own such property free and clear of all liens or encumbrances except as so noted, and I further promise not to transfer or encumber any of said property until my liability on said Bail Agreement has been released. I understand the Second Party and/or Surety is permitting the said bail to remain in force upon reliance of the statements made by me and I do hereby

this _____ day of _____, 20____, set my hand

DEFEENDANT HOME TEL _____ WORK TEL _____ CEE _____ PPR _____

SIGNATURE _____ Address _____ City _____ State _____ Zip _____

EMPLOYER _____ Address _____ City _____ State _____ Zip _____

DL No _____ S S No _____ Date of Birth _____

INDEMNITOR HOME TEL _____ WORK TEL _____ CEE _____ PPR _____

SIGNATURE _____ Address _____ City _____ State _____ Zip _____

EMPLOYER _____ Address _____ City _____ State _____ Zip _____

DL No _____ S S No _____ Date of Birth _____

INDEMNITOR HOME TEL _____ WORK TEL _____ CEE _____ PPR _____

SIGNATURE _____ Address _____ City _____ State _____ Zip _____

EMPLOYER _____ Address _____ City _____ State _____ Zip _____

DL No _____ S S No _____ Date of Birth _____

INDEMNITOR HOME TEL _____ WORK TEL _____ CEE _____ PPR _____

SIGNATURE _____ Address _____ City _____ State _____ Zip _____

EMPLOYER _____ Address _____ City _____ State _____ Zip _____

DL No _____ S S No _____ Date of Birth _____

The Defendant and the Indemnitor(s) agree and authorizes Sunshine State Bail Bonds, Inc., and/or its agent(s) to view and/or extract and monitor all anytime the Defendant's and the Indemnitor(s) credit history as part of the Defendant's criminal surety bond conditions. In addition the Defendant and the Indemnitor(s) also agree and authorizes any collection agencies which has been hired by Sunshine State Bail Bonds, Inc. and/or its agent(s) to view and/or extract, and monitor, at any time, their Defendant's and Indemnitor(s) credit history.

← Defendant
 ← fill out everything
 ← page

Date _____

CONTINGENT PROMISSORY NOTE

For value received, the undersigned, jointly, promises to pay to the order of _____ Dollars at _____ on demand the principal sum of \$ _____ Dollars at _____ if and only if the following stated contingency occurs:

Upon the forfeiture, estreature or breach of the surety bond or bonds posted on behalf of, _____ defendant (hereinafter Defendant), in Case No. _____ in the Court of _____ County Florida, together with any continuations and modifications, any extensions, substitutions, increments or appeals thereof (hereinafter Bond), or upon payment of any expenses incurred by the payee or holder (hereinafter Payee) to produce the Defendant before the appropriate court or courts of competent jurisdiction in the above cause, with interest thereon at the maximum rate permitted by Florida law from the date of the occurrence of the above stated contingency, until fully paid. All makers or endorser's now or hereafter becoming parties hereto, jointly and severally, waive demand, notice of non-payment and protest; waive any right to immunity from any such action or proceeding and waive any immunity of exemption of any property, wherever located, from garnishment, levy, execution, seizure or attachment prior to or in execution of judgement; waive any right to interpose any set-off or non-compulsory counter claim or to plead laches or any statute of limitations as a defense in such action.

If this note becomes in default and placed in hands of an attorney for collection, the foregoing agrees to pay all attorney's fees and other costs, including appellate fees and costs; and paralegal expenses; in addition it is expressly agreed by the undersigned that venue for any legal action to enforce the terms if this note shall be situated exclusively in the State and Federal Courts of Broward or Miami-Dade County, Florida, the undersigned hereby waives that either is an inconvenient forum, and agrees that all disputes arising hereunder shall be governed by the Laws of the State of Florida.

It is further agreed and specifically understood between the parties to this Note that there is presently no outstanding loan or debt represented by this Promissory Note, and that this Note is given to secure advances up to and including _____ Dollars and interest, if and when there is a forfeiture or estreature of the Bond.

It is further agreed and specifically understood that this Note shall become null and void at such time as all of the obligations under the Bond posted on behalf of the Defendant have been fulfilled and the Payee has been discharged of all liability and duly exonerated thereunder in writing and until such time as same occurs, the note shall remain in full force and effect.

THE UNDERSIGNED HEREBY KNOWINGLY, VOLUNTARILY AND INTENTIONALLY WAIVE THE RIGHT TO TRIAL BY JURY WITH RESPECT TO ANY LITIGATION BASED HEREON, ARISING OUT OF, UNDER OR IN CONNECTION WITH THIS NOTE. THE UNDERSIGNED HAS BEEN REPRESENTED BY AN ATTORNEY, HAS HAD THE OPPORTUNITY TO CONSULT WITH AN ATTORNEY IN CONNECTION WITH THIS JURY TRIAL WAIVER, OR OTHERWISE UNDERSTANDS THE LEGAL EFFECT OF THIS WAIVER.

This Note Shall Serve To Secure:

- (a) Any and all liability, loss, costs, damages, expenses, premiums and attorneys fees arising or incurred by Payee in connection with the above captioned Bond, or any other recognition, undertaking or other obligation, heretofore or hereafter executed, assumed or procured by Payee at the instance or request or on behalf of either of owner of the property encumbered by this Note (hereinafter Owner) or of the principals name:
- (b) For the payment of all premiums on such Bonds;
- (c) For the performance of every agreement (including continuations, or modifications, any extensions, substitutions, increments or appeals thereof with or without consent of Owner) made by Owner or Defendant in connection with said Bonds;
- (d) Against any liability, loss, costs, expenses, and attorneys fees in connection with any claim to the collateral security by person claiming adversely to Owner or to Principals named in the Bonds.
- (e) Any and all future advances made with or without consent of the Owner by Payee on behalf of the Defendant including but not necessarily limited to increments, modifications, extensions or substitutions, or the creation of any future obligation by the Payee in connection with the above described matter, or any bail bonds or obligation undertaken by Payee on behalf of Defendant including, without limiting, to the posting of a new bond for and on behalf of the Defendant in the nature of an appeal bond or a substitution extension or modification of the existing Bond.

Witness the due execution hereof as of the date first above written.

WITNESS _____ (SEAL)

WITNESS _____ (SEAL)

The foregoing instrument was acknowledged before me, this _____ day of _____, 20____, by _____ He/She is _____ personally known to me or did not take an oath, _____ and _____ did/

NOTARY PUBLIC, State of Florida
Print Name: _____
My Commission Expires: _____

Application For Appearance Bond

114600

1. Name and Address

Full Name PLEASE PRINT - First/Middle/Last Name _____ Tel _____ Bpr _____
 Home Address _____ Street _____ City _____ State _____ Zip _____
 Mailing Address _____ Street _____ City _____ State _____ Zip _____

Right Thumb

NAME OF INSURANCE CO.

2. Mortgage/Landlord/Residence Information

How long have you lived at current address? _____ Do you Own or Rent your home? Other _____
 Mortgage Company or Person from whom you rent _____
 Address of Mortgage Co. or Landlord _____

3. Personal Description

Weight _____ Height _____ Race _____ Sex Male Female Color of Eyes _____ Color of Hair _____ Date of Birth (mm/dd/yyyy) _____
 Nationality _____ Citizenship _____ Piece of Birth _____ Nickname or Alias _____ Tattoos/Scars _____

4. Marital Status/Children

Married Divorced Separated Widowed Single Girlfriend Boyfriend Spouse's Name _____ Phone _____
 Spouse's Occupation _____ Are you responsible for anyone else's support? _____
 No. Of Children _____ Ages _____
 Child's Name _____ Age _____ School Attended _____
 Child's Name _____ Age _____ School Attended _____

5. Employment

Your Occupation _____ Name of Co. _____ Bus. Phone _____
 Name of Supervisor _____ Address _____ How long have you worked for this company? _____
 Former Employer(s) _____

6. SS # / DL # / Car / Credit Cards

Social Security # _____ Drivers License # _____ State _____
 Describe the Car You Drive: YEAR _____ MAKE _____ COLOR _____ MODEL _____ TAG NO. _____
 Where Financed? _____ Amount Owed \$ _____
 Credit Card Name & Acct # _____ Credit Card Name & Acct # _____
 Credit Card Name & Acct # _____ Credit Card Name & Acct # _____

7. Bank Accounts

Name of Institution _____ Signature _____ Account No. _____
 Name of Institution _____ Signature _____ Account No. _____

8. Attorney

Full Name _____ Street _____ City _____ State _____ Phone _____
 Current Address _____

9. Personal References or Friends (Not Related, Different From Above)

| A | Name | Yrs. Known | Occupation | Work/Phone Address | Phone |
|---|------|------------|------------|--------------------|-------|
| B | | | | | |
| C | | | | | |

10. Relatives (If not living, write deceased Complete fully)

| Father | Name | Occupation | Address/City/State | Phone |
|----------------|------|------------|--------------------|-------|
| Mother | | | | |
| Brother | | | | |
| Sister | | | | |
| Father-in-Law | | | | |
| Mother-in-Law | | | | |
| Brother-in-Law | | | | |
| Cousin | | | | |

TERMS AND CONDITIONS

The following terms and conditions are an integral part of the application for Appearance Bond No. _____ or 16. Agent shall receive a premium in the amount of _____ \$ _____ Dollars, and the parties agree that said appearance bond is condition upon full compliance of all terms and is a part of said bond and application hereof.

NOTE: Premium on this Bond is NOT Returnable.

- Apprehend, arrest and surrender the principal to the proper officers at any time as provided for hereunder, or for any reason other than as enumerated below in paragraph 3, then principal shall be entitled to a refund of the bond premium.
- In the event surrender or principal is made prior to the expiration of the application, the application shall constitute a breach of principal's obligations to _____, and the parties agree that said appearance bond is condition upon full compliance of all terms and is a part of said bond and application hereof.
- Its undersigned and signed full and complete responsibility shall constitute a breach of principal's obligations to _____ shall have the right to forthwith apprehend, arrest and surrender principal, and principal shall have no right to any refund of premium whatsoever. Said events which shall constitute a breach of principal's obligations hereunder are:
 - principal shall move from one address to another within the State of Florida without notifying _____ or its Agent in writing prior to said move
 - principal shall commit any act which shall constitute reasonable evidence of principal's intention to evade a forfeiture of said bond
 - principal is arrested and incarcerated by any officer other than a proper traffic violator
 - principal shall make any material false statement in the application or fail to provide agreed collateral
 - indemnitor requests principal be surrendered in writing
- I hereby waive any and all rights I may have under Title 28 Florida Statutes - Freedom of Information Act, Title 6 - Fair Credit Reporting Act, and any such laws or State law, consent to and authorize _____ and/or its Agent to obtain any and all private or public information and/or records concerning me from any party or agency, private or governmental (local, State, Federal), including but not limited to, Social Security Records, criminal records, civil records, driving records, telephone records, medical records, school records, worker compensation records, employment records, authorization without reservation, any party or agency, private or governmental (local, State, Federal), contacted by _____ and/or its Agent, to furnish any and all private and public information and records in their possession concerning me to _____ and/or its Agent.

APPLICANT'S SIGNATURE _____

Defendant info.