


BAIL BOND APPLICATION - DEFENDANT PROFILE

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|--|-----------------|---|-------------------|
| COMPANY  NORTH MAIN BAIL BOND CO. EXIT NORTH MAIN | PRODUCER | PRODUCER NAME, ADDRESS, PHONE AND PRODUCER LICENSE NUMBER MUST BE PREPRINTED OR STAMPED HERE: T. Stith II 108 Pecore Street Houston, Texas 77009 (713) 844-8000 | Lic# 74494 |
|--|-----------------|---|-------------------|

READ CAREFULLY AND COMPLETE

1. Defendant Name and Address

Defendant Name _____ My friends/family know me as _____
First Middle Last

Home Phone# _____ Cell Phone # _____ Work Phone # _____

Current Address _____ Email _____

City _____ State _____ Zip _____ How Long? _____ Rent Own

Landlord Name _____ Landlord Phone # _____

Former Address _____ City _____ State _____ Zip _____

How Long at this address? _____ yrs. _____ mos. From _____ To _____ Rent Own
(mm/dd/yyyy) (mm/dd/yyyy)

2. Personal Description

M F DOB _____ Race/Nationality _____ Height _____ Weight _____

Eye Color _____ Hair Color _____ Glasses _____ Facial Hair _____ Complexion _____

Tattoos Piercings (Specific) _____ Scars / Distinguishing Marks _____

Medical Conditions / Disabilities _____

Place of Birth _____ SSN _____

Driver's License / ID # _____ State Issued _____ Name of Last City _____ State _____

Number of Years in City _____ Number of Years in State _____ Number of Years in U.S. _____

Are you a U. S. citizen? Yes No A# _____

3. Employment

Current Employer _____ Position _____ How Long _____

Address _____ City _____ State _____ Zip _____

Supervisor's Name _____ Phone # _____

Former Employer _____ Position _____ How Long _____

Address _____ City _____ State _____ Zip _____

Supervisor's Name _____ Phone # _____

4. Vehicle

Year _____ Make _____ Model _____ Plate _____
Where Financed _____ Amount Owed \$ _____
Address _____ City _____ State _____ Zip _____
Insurance Company / Agent _____ Phone # _____

5. Relatives and Best Friend

Father Name _____ Home Phone # _____ Cell Phone # _____
Address _____ City _____ State _____ Zip _____
Employer _____ Work Phone # _____
Mother Name _____ Home Phone # _____ Cell Phone # _____
Address _____ City _____ State _____ Zip _____
Employer _____ Work Phone# _____
Best Friend Name _____
Address _____ City _____ State _____ Zip _____
Employer _____ Work Phone # _____

6. Martial Status/Children

Single Married Live With Separated Divorced Widowed

Significant Other Name _____ Years together _____
Address _____ E-mail _____
Home Phone # _____ Cell Phone # _____ SSN _____
Employer _____ Supervisor Name _____ Work Phone# _____

Child Name Age School/Employer Mother / Father Name

7. Financial Information

Financial Institution _____ Phone # _____ Savings Checking
Address _____
City _____ State _____ Zip _____ Average Balance \$ _____

References

1. Ref. Name _____
Brother / Sister
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

2. Ref. Name _____
Brother / Sister
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

3. Ref. Name _____
Brother / Sister
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

4. Ref. Name _____
Family
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

5. Ref. Name _____
Family
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

6. Ref. Name _____
Family
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

7. Ref. Name _____
Friends
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

8. Ref. Name _____
Friends
Address _____ City _____ State ____ Zip _____
Home Phone # _____ Cell Phone # _____ Relationship _____

Authorized Signature

The undersigned accepts and agrees to all terms and financial obligations as stated in the bail bond indemnity agreement and acknowledges that they are also responsible for all future charges regarding this bond. I agree and hold harmless the surety of the agent for all losses in connection with this bond(s) and not otherwise prohibited by law. I recognize and represent my full satisfaction and receipt of all services relating to the bond. If the defendant fails to check in after 24 hours of being released. I understand and acknowledge that I will take full responsibility for the bail bond by the surety. Failure of the defendant checking into our office after being released or detained by another agency or detention center doesn't release me from any and all financial obligations for the bond(s). By acknowledging and signing this statement, I relinquish any rights to dispute this or future transactions in any way, once the defendant has been released.

I state that the information in this form is true and correct and the best of my knowledge. I understand that any information found to be false or omitted from this form could cause surrender of bail.

Signature: _____ Date: _____

Address: _____ City _____ State ____ Zip _____