

## **APPLICATION FOR APPEARANCE BOND**

## **U.S. SPECIALTY INSURANCE COMPANY**

Exclusive National Managing General Agency

SURETY CORPORATION OF AMERICA • 1000 NW 14TH STREET • MIAMI • FLORIDA • 33136

APPEARANCE BOND NO		DATE	PREMIUM DUE	E SURETY COI	MPANY OR ITS AGEN	 √T\$				
These terms and conditions are an integral part of this application for the above numbered Appearance Bond for which U.S. Specialty Insurance Company (USSIC) or its Agent shall eceive premium in the amount herein specified, and the parties agree that said appearance bond is conditioned upon full compliance of all said terms and conditions and is a part of said bond and application therefore.										
1. USSIC as the Surety Company, through its duly appointed agent, shall have control and jurisdiction over the principal during the term for which the bond is executed and shall have the right to apprehend, arrest and surrender the principal to the proper officials at any time as provided by law.  2. In the event surrender of principal is made prior to the time set for the principal's appearances, and for reasons other than as enumerated below in paragraph 3, then principal shall be entitled to a refund of the bond premium.  3. It is understood and agreed that the happening of any one of the following events shall constitute a breach of principal's obligation to USSIC hereunder, and USSIC 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:  (a) If principal shall depart the jurisdiction of the court without the written consent of the court and the Surety Company or its Agent.  (b) If principal shall move from one address to another without notifying the Surety Company or its Agent in writing prior to such move.  (c) If principal shall commit any act which shall constitute reasonable evidence of principal's intention to cause a forfeiture of said bond.  (d) If principal shall make any material false statements in the application for appearance bond.										
PRINCIPAL NAMED BELOW ACKNOWLEDGES AND AGREES TO THE TERMS AND CONDITIONS HEREIN BY SIGNING THE REVERSE SIDE OF THIS APPLICATION										
1. NAME & ADDRESS OF PRIN										
FULL NAME	irst/Middle/Last	HOME PH	WC	ORK PH	CELL					
CURRENT ADDRESS		CITY		E Z	EMAII					
2. RESIDENCE INFORMATION / MORTGAGE / LANDLORD										
YEARS/MONTHS AT CURRENT ADI	DRESS:	_ DO YOU: 🗆 OWN 🗆	RENT OTHER							
$\square$ MTG. COMPANY OR $\square$ LANDLO	RD NAME		ADDRESS	STREET	CITY STA	TE ZIP				
3. PERSONAL DESCRIPTION / I				SIREEI	CITY STA	E ZIP				
WEIGHT HEIGHT RACE			EYE COLOR	HAIR C	OLOR MA	IRKS				
BIRTH PLACEB	IRTH DATE _	NATION NATION	AL CITIZENSHIP _	COUNTRY	_ NICKNAMES OR A	LIAS				
4. MARITAL STATUS / CHILDRE	N	mo/day/year		COUNTRY						
☐ MARRIED ☐ DIVORCED ☐ SEI		widowed □ single s	POUSE'S NAME							
SPOUSE OCCUPATION	USE OCCUPATIONSPOUSE'S EMPLOYERPHPHPHPHPHPHPHPHPHPHPH				l					
CHILD'S NAME		AGE SCHOOL AGE SCHOOL	ATTENDED ATTENDED							
CHILD'S NAME		AGE SCHOOL	ATTENDED							
ARE YOU RESPONSIBLE FOR ANYO	NE ELSE'S SI	UPPORT?								
5. EMPLOYMENT										
YOUR OCCUPATIONNAME OF SUPERVISOR			IAME OF EMPLOY	/ER	DI	 I				
HOW LONG WITH THIS EMPLOYER		FORMER EMPLOYER(S) _								
6. SOCIAL SECURITY # / DRIVER'S LICENSE # / CAR / CREDIT CARDS										
SOCIAL SECURITY NUMBER			ORIVER'S LIC. NUI	MBER		STATE				
AUTOMOBILE: MAKE YEA	AR AND MODE	EL(	OLOR TA	AG NO	AMOUNT OWE	D \$				
LENDER CREDIT CARD NAME & ACCT. #		······································	KLDII CAKD NAI	WIL & ACCT. #						
7. ATTORNEY INFORMATION										
FULL NAME		ADDRESS			PH.					
8. PERSONAL REFERRENCES - FRIENDS (OTHER THAN RELATIVES)										
NAME	YEARS KNOWN	OCCUPATION		WORK / HOME	ADDRESS	PHONE				
AB.										
C										

9. RELATIVES								
NAME	OCCUPATION	ADDRESS / CIT	Y / STATE / ZIP	PHONE				
FATHER:   MOTHER:								
BROTHER:								
BROTHER:								
SISTER:SISTER:								
FATHER-IN-LAW:								
MOTHER-IN-LAW:BROTHER-IN-LAW:								
COUSIN:								
10. ARRESTS - CRIMINAL HISTORY		<u> </u>		<u> </u>				
ARE YOU CURRENTLY ON BOND WITH ANYONE?			TION OR PAROLE? 🗆 YI	ES 🗆 NO				
HAVE YOU EVER FAILED TO APPEAR IN COURT?								
DATE CHARGE(S)	COUNTY & S	STATE	DISPOSITION					
2.								
3								
11. COURT DATE NOTIFICATION - DEFENDANT / INDEMNITOR / ATTORNEY								
DEFENDANT: NAME/ADDRESS/PHONE								
ATTORNEY: NAME/ADDRESS/PHONE								
12. TYPE OF COLLATERAL								
☐ (1) CASH ☐ (2) CASH VALUE ☐ (3) EQUITY [	7 (4) ASSIGNMENT	(5) NOTE AND MORTGAGE [	7 (6) MISCELL ANEOUS					
OWNER(S) NAME:	. ,	• ,						
ADDRESS:			THORE					
OWNER(S) NAME:			DUONE					
, ,			FIIONE					
ADDRESS:OWNER(S) NAME:			DUONE					
ADDRESS:			FIIONE					
COLLATERAL DESCRIPTION:								
COLLATERAL LOCATION:								
Under penalties of perjury, I declare that I	have read the force	uoing, and the informatio	n provided is true an	d correct without				
reservation. The information and represer	ntations made in thi	s Application are for the	purpose of inducing	the Surety to un-				
dertake the bond(s) for which I have applitions contained herein. I agree to indemr								
that may arise from the execution of the bo	ond(s) applied for h	erein, unless prohibited	by applicable law or r	egulation.				
WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTE OR DECEIVE ANY INSURER, FILES A STATEMENT OF CL CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING	AIM OR AN APPLICATION							
FOUND GUILTY OF A FELONY.		APPLICANT SIGNATURE						
MAILING ADDRESS IF DIFFERENT FROM RESIDENCE:								
BAIL AGENCY:								
☐ TRANSFER BOND ☐ RE-WRITE ☐ POSTING								
P.O.A. (S) #:								
COURT: FEDERAL CIRCUIT COUNTY								
CHARGES CONTINUED:*PREMIUM AMOUNT DUE: \$		^JUDG	E					
CROSS COLLATERAL: ☐ (1) CASH ☐ (2) CASH VALUE ☐ (3) EQUITY ☐ (4) ASSIGNMENT ☐ (5) NOTE AND/OR MORTGAGE ☐ (6) MISC.  *NAME:P.O.A.#								
*NAME:			P.O.A.#					