

KIND BAIL - Defendant's Application - Page 1 of 2

AGENT _____

DATE OF APPLICATION _____

Defendant's Personal Information:

Court _____ Appearance Date _____ Time _____

Offense _____

Case# _____

Power# _____ Amount \$ _____ Premium \$ _____

Defendant's Personal Information:

Defendant's Full Name: (First) _____ (Middle) _____ (Last) _____

Alias/Nickname/Street Name _____ Cell Phone# _____

Email: _____

SSN _____ - _____ - _____ DOB ____/____/____ Place Of Birth _____ Race _____

Driver's License/ID Card/Passport _____ State/Country Issued _____ Expiration _____

Address _____ () Own

City _____ State _____ Zip Code _____ () Rent Landlord _____

Present Occupation(s) _____

Employer _____ Shift _____ How Long _____

Address _____ Job Title _____

City _____ State _____ Zip Code _____ Phone _____

Spouse's Name (First) _____ (Middle) _____ (Last) _____

Cell Number _____ SSN _____ - _____ - _____ DOB ____/____/____

Auto Year _____ Make _____ Model _____ Color _____

Tags/Plates _____ State _____ Amount Owed \$ _____ Lien Holder _____

Insurance Agency/Company _____

Previous Arrest _____ Where _____

On Probation/Parole _____ Where _____ Probation/Parole Officer _____

Attorney _____ Phone _____

Address _____

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References

1. Name (First) _____ (Last) _____ Relation _____
Address _____ Years Known _____
City _____ State _____ Zip Code _____ Phone _____

2. Name (First) _____ (Last) _____ Relation _____
Address _____ Years Known _____
City _____ State _____ Zip Code _____ Phone _____

3. Name (First) _____ (Last) _____ Relation _____
Address _____ Years Known _____
City _____ State _____ Zip Code _____ Phone _____

I have read and had explained to me and understand the following terms and conditions of **The North River Insurance Company** executing the above listed Surety Bal Bonds on my behalf:

1. **The North River Insurance Company** shall have control and jurisdiction over me during the term for which my bail bond(s) is executed and shall have the right to apprehend and surrender me to the proper officials and any time for violation of my bail bond(s) obligations to the court and **The North River Insurance Company** as provided by law.

2. It is understood and agreed that anyone of the following actions by me shall constitute a breach of my obligation to **The North River Insurance Company** and that **The North River Insurance Company** and/or its Agent shall have the right to forthwith apprehend and surrender me in exoneration of my bail bond(s):

- a. If I depart the jurisdiction of the court without written consent of the court and **The North River Insurance Company** or its Agent.
- b. If I shall move from one address to another or change my phone number without notifying **The North River Insurance Company** and/or its Agent.
- c. If I commit any act, which shall constitute reasonable evidence of my intention to cause forfeiture of, my bail bond(s).
- d. If I am arrested and incarcerated for any offense other than minor traffic violation.
- e. If I make any false material false statement in my Surety Bail Bond Application and Agreement with **The North River Insurance Company**.

3. If I depart the jurisdiction of the Court wherein my bail bond(s) is posted by **The North River Insurance Company** for any reason, and I am captured by **The North River Insurance Company** and/or its Agent, or law enforcement agency, in a State other than the one which my bail bond(s) is posted. I hereby agreed to voluntarily return to the State of the original jurisdiction, and I hereby waive extradition rights proceedings and further consent to the application of such reasonable force as may be necessary to effect such return.

4. I hereby waive any and all rights I may have under Title 29 Privacy Act - Freedom Of Information Act, Title 6, Fair Credit Reporting Act, and any such local or State law. I consent to and authorize **The North River Insurance Company** 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 record, civil records, driving records, telephone records, medical records, school records, worker's compensation records, and employment records. I authorize without reservation, any party or agency, private or governmental (local, State, Federal) contacted by **The North River Insurance Company**, and/or its Agent, to furnish any and all private and public information and records in their possession concerning me to **The North River Insurance Company**, and/or its Agent.

Defendant's Signature _____

Date _____

State of Nevada County of Clark

On this _____ day of _____, 20 _____

Before me personally appeared _____

known to be the person described in and who executed the forgoing instrument and he/she

there upon acknowledged to me that he/she/they executed the same