

POTTER COUNTY BAIL BOND BOARD

BAIL BOND EMPLOYEE APPLICATION FORM

(DELIVER TO THE SECRETARY OF THE BOARD)

The following information is required to process your application to write bonds and represent licensed bondsmen in Potter County. **Failure to provide complete information constitutes grounds for denial.** By signature, applicant consents to a Criminal History and Credit Check by the Potter County Sheriff's Office, and releases of any information contained therein to the Potter County Bail Bond Board. Furthermore, applicant certifies they have been provided with a copy of the policies and regulations of said Board and that the applicant has read and understands the policies and regulations therein contained.

PLEASE PRINT CLEARLY OR TYPE ALL INFORMATION

1. _____
Last name (Maiden Name) First Name Middle Name

Any other name ever used: _____

2. _____
Street Address City State Zip Code

3. _____
Home Phone Work Phone

4. _____
Date of Birth (MM/DD/YYYY) Place of Birth City and State

5. _____ 6. _____ 7. _____ 8. _____
Hair Color Eye Color Height Weight

9. _____ 10. _____
Drivers License # and State Social Security #

11. _____
Bonding Company License # Bond Company Phone #

FOR OFFICIAL USE ONLY: Approved: _____ Denied: _____

Date Considered: _____ Date Application Submitted: _____

Reason for Denial: _____

Signature of Officer _____ Date: _____

Printed Name: _____

13. Have you been convicted of a crime or received probation for an offense, other than a Class C Misdemeanor? _____ Yes _____ No

If yes, please provide the following information for each conviction or probation:

CHARGE	DATE	COUNTY	DISPOSITION

Continue on a separate sheet, if necessary

14. Do you currently have Criminal charges pending? _____ Yes _____ No

If yes, please provide the following information for each conviction or probation:

CHARGE	DATE	COUNTY	DISPOSITION

Continue on a separate sheet, if necessary

I hereby swear and affirm that the foregoing information is true and correct and that there are no omissions. I understand that a criminal history check will be conducted and that any evasion, false statement, answer or omission shall be grounds for denial of this application which could result in criminal charges. I affirm that I have received, read and understand the policies and regulations of the Potter County Bail Bond Board and agree to abide by the same.

Applicants Signature

Date

Printed Name

SWORN TO AND SUBSCRIBED BEFORE ME by applicant, _____
On this _____ day of _____, 20____, witness my hand and seal of office:

Notary Public, State of Texas

(seal)

Typed/Printed Name of Notary

Date Commission Expires