

Email Address: setemfree183@gmail.com

CO-SIGNER APPLICATION FOR SURETY BOND

A: Indemnitor will answer the questions below, and every answer is true and correct without any mental reservation whatsoever.

B: If indemnitor shall make any false statement on this application, the bond(s) will or may be surrendered at the option of the bonding company.

FULL NAME: _____ NICKNAME OR ALIAS: _____

ADD. WHERE YOU RESIDE: _____

TELEPHONE: _____ HOW LONG AT ADDRESS? _____

NAME OF MORTGAGE CO. / APT. COMPLEX/ LANDLORD: _____

PREVIOUS ADDRESS: _____

DRIVER'S LICENSE: _____

SOCIAL SECURITY #: _____ OTHER I.D.: _____

DATE OF BIRTH: _____ AGE: _____ SEX: _____ WEIGHT: _____ HEIGHT: _____

RACE: _____ HAIR COLOR: _____ EYE COLOR: _____ BUILD: _____

RELATION TO DEFENDANT: _____ NAME OF DEFENDANT: _____

DEFENDANT ADDRESS: _____ PHONE #: _____

EMPLOYMENT

EMPLOYER: _____ OCCUPATION: _____

ADDRESS: _____ MONTHLY SALARY: _____

TELEPHONE: _____ HOW LONG: _____

PREVIOUS EMPLOYMENT: _____ OCCUPATION: _____ HOW LONG _____

TELEPHONE: _____ ADDRESS: _____

ARE YOU MARRIED? _____ DO YOU HAVE CHILDREN? _____ HOW MANY? _____

DO YOU LIVE WITH SPOUSE/FRIEND? _____ HOW LONG? _____

FINANCIAL INFORMATION

DO YOU HAVE A BANK ACCOUNT? _____ NAME OF BANK _____

DO YOU HAVE CHECKING, _____ SAVING _____ ACCOUNT OR BOTH _____

DO YOU GET DIRECT DEPOSIT? _____ FOR RETIREMENT _____ SSD _____ CHILD SUPPORT _____

DO YOU HAVE ANY CREDIT CARD? _____ NAME OF CARD _____

LIST ALL AUTOMOBILES

YEAR: _____ MAKE: _____ MODEL: _____ COLOR: _____ LIC: _____

YEAR: _____ MAKE: _____ MODEL: _____ COLOR: _____ LIC: _____

DO YOU OWN YOUR CAR? _____ HOW LONG: _____

ARE YOU STILL PAYING FOR YOUR CAR? _____ LIEN HOLDER _____

DO YOU HAVE INSURANCE? _____ WHO'S NAME _____

PLEASE READ CAREFULLY

The client hereby warrants that the foregoing declarations made and answers are given are the truth without any reservation and are made for the purpose of inducing the Surety to become surety to procure surety on the bond or undertaking applied for herein, with the intent and purpose that they be relied on fully.

The client hereby authorizes and directs his relatives, employers, bankers, the Federal Social Security Administration, the Internal Revenue, the State Department of Disability Insurance, the United States Armed Forces, the State of Motor Vehicles, All Municipal, County, State and Federal Law Enforcement Agencies and any other persons or organizations having information concerning the Client's whereabouts to give such information to Sharon McCleveland Co., and its assigns and/or duly authorized representatives. The Client hereby waives his or her rights with aspects to the Privacy Act and authorizes the use of copies of these documents by Sharon McCleveland Co. and it's assigns and/ duly authorized representatives.

CO-SIGNER SIGN HERE: _____

CO-SIGNER MAILING ADDRESS: _____

AGENT-WITNESS: _____

GUIDELINES AND RULES FOR CO-SIGNERS

You share in the responsibility to ensure that following release from jail. All defendants have twenty-four (24) hours to come into the office to complete all paperwork-**NO EXCEPTIONS!!!** You share the responsibility to ensure that the defendant obtains county setting date(s) and that this information is reported to the Bonding Office.

You share in the responsibility to ensure that the defendant comes to the office **IN PERSON** after every court appearance. You share in the responsibility that the defendant must check in **EVERY WEEK** by phone or in office to sign a check-in sheet. Ask agent for the correct check-in days(s). Defendant bond may be surrendered if they fail to check in.

Any delinquent balance owed on your account without notifying the District Attorney's office and the bonding company. Doing so violates your bonding agreement.

You share in the responsibility to ensure that all information given to the bonding company must be current and correct at all times. Any changes must be reported in writing within 48 hours or bond may be surrendered.

If the defendant fails to follow our guidelines and rules the bond(s) may be surrendered and the defendant will be placed in jail.

Any and all refund request must be submitted Monday thru Friday between the hours of 8:00am to 5:00pm. Your original receipt and payment request form are required for such transactions. All refunds are available 7 to 10 business days from the date submitted and available for pick up on Fridays after 3pm.

I hereby acknowledge that I have read and understand all Set'em Free Bail Bond guidelines and rules.

Co-Signer Signature _____ **Date** _____

Bonding Agent _____ **Date** _____

PROMISSORY NOTE

For a valuable consideration, the receipt and sufficiency of which is hereby acknowledge, we or either of us, as principles, promise to pay to the order of _____ in the city of _____, _____ County. Texas, the sum of \$ _____ Dollars, in legal money of the United States of America, with interest thereon at the rate of ten percent (10%) per annum from date until paid.

This note is due and payable in full as follows at the election of the holder.

Without Demand or notice upon the forfeiture of the Bail Bond _____
_____, in Case No. _____ or

Upon **DEMAND**, and a Demand upon maker of this note shall be sufficient notice as a Demand upon all said

Makers, whether made orally or in writing.

It is expressly agreed and provided that upon default in the punctual payments of this note when it becomes due and payable (punctual payment shall mean not to exceed five days after the note becomes due and payable as provided above) then an additional sum as reasonable collection fees shall be added to said principal and interest, and further, if the same placed in the hands of an attorney for collection, then the undersigned agree and promise to pay an additional sum as a reasonable attorney's fee, which in no event shall be less than forty percent (40%) of the principal and interest then owing.

It is expressly agreed and provided that after this note becomes due and payable, the holder hereof may agree with any of us to accept partial payment or payments I installments and such agreement or payments shall not affect the liability of the other makers who shall remain bound for payments hereof. This contract is performable in _____ County, Texas.

It is expressly agreed and provided that if suit is necessary for collection of this note, the holder hereof may sue any or all of the undersigned and any party not served with citation therein shall not be released but shall remain bound for the payment hereof.

It is expressly agreed and provided that this Promissory Note is executed pursuant to, and under the Laws of Texas, and that it is intent of the Principals hereof that the Laws of the State of Texas shall govern to the exclusion of the laws of any forum, without regard to the jurisdiction in which any action or special proceeding may be instituted; and that it is the express intent of the Principals hereof that Article IV of the Constitution of the United States shall provide for full faith and credit to this instrument, regardless of the physical sit us of any Principals hereof.

Principals hereby acknowledge receipt of a copy of this Promissory Note and have read and understand the provision of same before signing it.

Dated this _____ day of _____, 20 _____

Co Signer _____

Address _____ Telephone _____

City _____ State _____

Social Security Number _____

Set'Em Free Bail Bonds
222 Continental Ave Ste., Ste. 150
Dallas, Texas 75207

DEFENDANT AND INDEMINETOR'S AGREEMENT OF RESPONSIBILITY

RELEASE AND REPORT WITHIN 24-HOURS

It is the responsibility of the Defendant and ALL Indemnitor's to ensure that _____

Defendant must physically report to Set Em Free Bailbonds within 24 hours after being released from custody.

You must always provide a working phone number and email for notifications regarding defendant check-ins, court dates and invoicing if needed. Unacceptable communications devices or services include: Google Voice, Text Me Now, Messenger, etc. You must contact Us within 48 hours of any charges to the bond(s).

You are responsible for knowing when your court date and report time is. We recommend that you arrive to court 15 minutes prior to docket call. Any delays to court should be reported to Set Em Free Bail Bonds, the Court and your Attorney.

AS THE CO-SIGNER YOU ARE RESPONSIBLE FOR UPDATING YOUR CONTACT INFORMATION EVERY 30 DAYS.

Set Em Free Bailbonds will attempt to make a COURTESY CALL to defendant and/or co-signors the day before court. Failure to comply with any of the above conditions shall be grounds to revoke the Bailbond posted, re-arresting the defendant and surrender them to the proper authorities. As part of our security features to help prevent fraud and identity theft, when submitting your application and future transactions you agree to allow us to verify that your mobile phone is in proximity to the transaction location. When signing into this location, your data will be saved and may be available to resolve concerns you may have. If you choose to opt-out at some point, you may do so by contacting (BAILBOND TECHNOLOGIES) at 904-924-4874. By submitting your application, you agree with the Terms and Conditions outlined therein for the use of our services and authorize our disclosure to our financial institution and telephone carrier.

ALL DOCUMENTS WILL BE MADE A PART OF THE DEFENDANT'S PERMANENT FILE.

Failure to comply with Set Em Free Policies and rules could result in immediate surrender of the Defendant's bond(s), and a warrant would be issued for her/his arrest. All fiduciaries paid are forfeited and remaining balances due immediately to Set Em Free Bailbonds. Any Collateral, if taken, will not be returned until the appropriate Court provides documentation of discharge of bond(s).



CO-SIGNER: _____

Signature

Date

Sworn to the Subscribed before me this _____ day of _____, 20_____

NOTARY PUBLIC IN AND FOR GALVESTON COUNTY, TEXAS

MY COMMISSION EXPIRES