

Name _____

Date _____ Time _____ Case# _____ Power# _____

LEXINGTON NATIONAL INSURANCE CORPORATION CONFIDENTIAL APPLICATION FOR BAIL BOND

(All Questions Must Be Answered In Full)

I, the undersigned, do hereby apply to the LEXINGTON NATIONAL INSURANCE CORPORATION, to act as my bail in the amount of \$ _____, in the _____ court of _____ wherein I am charged with (Offense) _____ Receipt # _____

1. Name _____ Residence Phone _____

2. Alias _____ Nickname _____ Cell# _____

Address _____ How Long? _____

3. City _____ State _____ Zip Code _____

Employer _____ Phone# _____ How Long? _____

4. D.O.B. _____ Where? _____ How long this county? _____

Sex _____ Race _____ Height _____ Weight _____ Eyes _____ Hair _____

Complexion _____ Occupation _____

Scars, Marks or Tattoos _____

5. Spouse's Name _____ Emp. Phone _____ How long married? _____

6. Children-Age-School _____

Where do children live? _____ With whom? _____

7. Own or Rent Home? Mortgage Company or Landlord _____

8. Year-Model-Color of Auto _____ Tag No. _____

Where Financed? _____ Amount Owed _____

9. Driver's License# _____ Exp. _____ SS# _____

10. Name and number of any labor union, club, lodge, etc. _____

11. List all previous arrests _____

12. Bonded before by _____ Still Indebted _____

Parole Officer: _____ Probation Officer: _____

NAME

EMPLOYER

ADDRESS-PHONE

Attorney _____

Father _____

Mother _____

Brother _____

Brother _____

Sister _____

Sister _____

Brother-in-Law _____

Sister-in-Law _____

Father-in-Law _____

Mother-in-Law _____

Friend _____

Arrest Date: _____ Time: _____ Location: _____

By What Department? _____ Officer: _____

Co. Def. _____ Companion Case: _____

Facts About Case: _____

Notes: _____