<b>New Application</b>	
<b>Renewal Application</b>	

### **CORPORATE SURETY LICENSE APPLICATION**

#### FRANKLIN COUNTY BAIL BOND BOARD FRANKLIN COUNTY MOUNT VERNON, TEXAS

NO APPLICATION SHALL BE DEEMED COMPLETE NOR SHALL ANY LICENSE ISSUED BECOME EFFECTIVE UNTIL ALL APPLICABLE PROVISIONS OF THE TEXAS OCCUPATIONS CODE, CHAPTER 1704, AND THE CURRENT RULES AND REGULATIONS OF THIS BOARD HAVE BEEN FULLY COMPLIED WITH.				
******************	*********			
Corporate Surety:				
Applicant Name:				
Designated Agent's Name:	Designated Agent's Name:			
Designated Agent's Proposed D.B.A:				
FOR BOARD USE ONLY DO NOT WRITE BELOW THIS LINE				
Application Received by:				
\$500.00 Fee Receipt Attached? (Circle one	) Yes / No			
Corporate Power of Attorney filed of Record with Franklin County Clerk:				
Outstanding Un-satisfied Forfeitures:				
Conditionally Approved / Denied (New Only) Date:				
Application Final Approval Granted By Board and License Issued	on:			
License Number:	Date Expires:			

## CHECKLIST OF DOCUMENTS REQUIRED AT TIME OF SUBMISSION FOR APPLICATION TO BE CONSIDERED BY THE BOARD

#### INCOMPLETE APPLICATIONS WILL BE DENIED LICENSURE

A. A Complete Original Application.	
B. A five hundred dollar (\$500.00) applica County Bail Bond Board" deliverable to	
C. A Sworn Financial Statement declaring copy of the most recent <b>year-end finance</b> Department of Insurance.	<u> </u>
D. A certified copy of the properly filed Polisted in this Application.	wer of Attorney for the Designated Agent
E. Copy of the "Certificate of Authority" to by the Texas State Board of Insurance.	o do business in the State of Texas, Issued
F. Designate form of \$50,000.00 security to Treasurer if application is conditionally a	
(Circle One) Certificate of Depo	sit / Cashier's Check
Date Application Prepared:	_(Circle One) NEW or RENEWAL
If Renewal, the date original license was granted by	Franklin County:
Current License Number:	Expiration Date:

# ATTACH PAGES AS NEEDED TO FULLY ANSWER EACH OUESTION

1.	Corporate Applicant:	
	Corporate Headquarters Address:	·
	City, State, Zip code:	
	Corporate Headquarters Telephone: Email:	,
2.	Is Corporation chartered in Texas? YesNo If Yes, year chartered attach a copy of the Articles of Incorporation filed with the Texas Secretary of State. If attach a copy of the properly filed Articles of Incorporation from the proper office Official in the State where the Applicant Corporation is chartered if a foreign corporand specify the year chartered.	"No", e and
3.	Has this Corporation been admitted to do business in the State of Texas? Yes No If "Yes", attach a copy of the Certificate of Authority to do business in the State of Texas. If "No", explain fully the status of this Corporation:	
4.	Is this Corporation qualified to write Fidelity, Guarantee and Surety Bonds under the To Insurance Code, as amended? Yes No If "No", Explain:	exas
5.	Texas Agent for Service of Process:	<u> </u>
	Texas Agent Address:	
	City, State, Zip Code:	
	Texas Agent Telephone: Email:	
	Linai.	

Desig	gnated busines	s address and te	elephone nun	nbers where b	ousiness is to b	e operated:
Addr	ess:					
City,	State, Zip:					
Busir	ness Telephone	e:			_ Fax: _	
Propo	osed D.B.A.: _					
Full l	Name of Desig	gnated Agent:_				
Date	of Birth:		Place	of Birth:		
Drive	er's License N	umber:		Driver's L	icense State:	
Offic	e Address:					
City,	State, Zip Coo	de:				
Offic	e Telephone N	Number:				
Date	Power of Atto	orney was filed	with Frankli	n County Cle	erk:	
Has t	this Designated	d Agent ever ov	wned or work	ked for a bail	bonding comp	any?
Yes_	No	If "Yes", Ex	xplain, givin	g full details,	name and date	es:
Has	this Corporati	on or its Desig	gnated Agen	t ever been	denied or refu	ised a bail bon
licens	se in any state'	? YesN	loHas	s either had	a bail bond li	cense suspende
or rev	voked by any b	oail bond or bor	nding author	ity in any stat	e? Yes	_No
If "Y	Yes" to any qu	uestion, explain	n giving full	details inclu	iding State, Co	ounty, Date and
	on:					

State,	any jurisdiction? YesNoIf "Yes", Explain, giving full details, juristate, County, Case Number, Court, Charge, Date of Offense, and Final Disposi		
Has t	his Corporation ever been charged, convicted, or held criminally liable fo		
felony	or misdemeanor offense in any jurisdiction? Yes No If '		
explai	in giving full details, jurisdiction, State, County, Case Number, Court, Charge,		
Date	of Offense, and final dispositions:		
-			
List A	<b>LL</b> Texas Counties in which this Corporation has a Corporate Surety bail bond		
	LL Texas Counties in which this Corporation has a Corporate Surety bail bond e:		

against your Corporation or against any bail bond business owned by your Corporation in whole or in part:  List all Agents who have been issued a power or attorney or other authorization by the Corporation to execute bail bond in Franklin County, Texas:	L1	st all unpaid or partially paid final judgments relating to bail bond forfeitures entere
List all Agents who have been issued a power or attorney or other authorization by this	ag	ainst your Corporation or against any bail bond business owned by your Corporation
	in	whole or in part:
	_	
	_	
Corporation to execute bail bond in Franklin County, Texas:		
	Li	st all Agents who have been issued a power or attorney or other authorization by thi

ATTACH PAGES AS NEEDED TO FULLY ANSWER EACH OUESTION

#### **CORPORATE SURETY'S OATH**

We, the undersigned officers of the below named Corporation, do hereby certify that we have personally read and reviewed this Corporate Surety's License Application, and we do hereby state and certify under oath that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made above and all attachments are true, complete and correct to the best of our knowledge and belief and are made in good faith.

We do further certify that we have read and understand the Franklin County Bail Bond Board Rules and the Texas Occupations Code, Chapter 1704, and we agree that the Corporation as Applicant and each of its Designated Agents and employees will comply with and be bound by these laws and rules.

We do hereby request and authorize the Franklin County Bail Bond Board or its designee to make a thorough and complete investigation of the facts and assertions made within this Application in order to confirm their veracity or falsity.

We hereby agree that in the event that this Application is found to contain any false statement, omission of information or misrepresentation of any kind, this Application will be denied.

In consideration of granting this Franklin County Corporate Surety's Bail Bond

License, and in order to insure payment of	of any and all obligation incurred by this Corporation
due to this license, the Corporation will d	eposit with the Franklin County Treasurer, security
in the form of a <u>n</u>	made out to the Franklin
County Treasurer in a form acceptable	to the Franklin County Bail Bond Board and the
Franklin County Treasurer and drawn o	n a bank insured by the Federal Deposit Insurance
Corporation in the amount of Fifty Thous	and Dollars (\$50,000.00) to satisfy any final judgment
of forfeiture that may be made on any bond	ds on which this Corporation is Surety.
·	
Signature of 1 <sup>st</sup> Corporate Officer	Signature of 2 <sup>nd</sup> Corporate Officer
Date	Date
Typed Name of Corporate Officer	Typed Name of Corporate Officer
Title of Office Held	Title of Office Held
Corporation's Full Name	
	1 6
	day of, 20, by
Affiants	and
	Notary Public in and for the County of
	, and the State of
	My Commission Expires:

Corporate Surety Rev. 03-19-2019

#### CORPORATE SURETY'S FINANCIAL STATEMENT

Corporate Applicant:	
Address:	
Franklin County D.B.A.:	
Franklin County Bail Bond Board Members,	
Corporate Officers submit to the Board Corporation as of	granted, the Corporation will notify the Board in in its financial condition. The Board is authorized to any time furnished in this application. This financial shed to the Board shall be the Board's property. In about this financial statement, and to investigate inscredit or financial responsibilities.  RMATION ON THIS STATEMENT WILL BE DENIAL OF A LEDGE OF THIS PENALTY, I HEREBY CERTIFY THAT NCIAL STATEMENT AND THE ATTACHED SCHEDULES
Signature of 1 <sup>st</sup> Corporate Officer	Signature of 2 <sup>nd</sup> Corporate Officer
Date	Date
Typed Name of Corporate Officer	Typed Name of Corporate Officer
Title of Office Held	Title of Office Held
Corporation's Full Name	
	ne_day of, 20, by
	Notary Public in and for the County of, and the State of My Commission Expires:

Corporate Surety Rev. 03-19-2019