

**CERTIFICATE OF PROFESSIONAL  
BONDSMAN  
(Professional Bail Company)**

Date Filed

STATE OF ALABAMA

IN THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY

TO THE CIRCUIT COURT CLERK

\*I, \_\_\_\_\_, ON BEHALF OF \_\_\_\_\_  
(name of professional bail company), REQUEST THAT THE  
COMPANY BE AUTHORIZED TO EXECUTE BONDS IN ITS NAME AS SURETY RETURNABLE TO THE CIRCUIT,  
DISTRICT AND MUNICIPAL COURTS OF THIS COUNTY, AND DO CERTIFY THAT:

1. I am a resident of the State of Alabama, residing at

\_\_\_\_\_  
(address) (city) (county)

The company is duly authorized to do business in the State of Alabama, and has its principal place of business within the State of Alabama at the following address:

\_\_\_\_\_  
(address) (city) (county)

Its resident agent for service of process is \_\_\_\_\_, whose address is

\_\_\_\_\_  
(address) (city) (county)

2. I am a/the \_\_\_\_\_ of the above-named company which is a \_\_\_\_\_  
organized under the laws of the State of \_\_\_\_\_, and I am duly authorized to execute this certificate on its behalf.

3. The company has not violated any provisions of the Alabama Rules of Criminal Procedure or orders of court within the past two (2) years.

4. The only persons who have any financial interests, either direct or indirect, in the professional bail company are as follows:

Name	Address	Nature and Extent of Interest
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. None of the above-named persons has been convicted of a felony or a crime involving moral turpitude except the following persons:

\_\_\_\_\_  
\_\_\_\_\_

who have been convicted of the following offenses: \_\_\_\_\_ and who have been pardoned or have had a restoration of civil rights.

6. The company has a sufficient financial net worth to satisfy the obligations which it may enter into as a surety, taking into consideration all other outstanding obligations and liabilities.

7. All appearance bonds shall be executed in the name of

\_\_\_\_\_  
(name of professional bail company)

as surety by the agents listed or appointed in the Qualifying Power of Attorneys, letter, or other documents presented to the court or any other so named in any such future Qualifying Power of Attorney, letter or other documents presented to the court or filed with the circuit clerk of the county.

8. \_\_\_\_\_

\_\_\_\_\_  
(name of professional bail company)

has no knowledge of any final forfeitures issued against it, which has been made final for more than thirty days and of which \_\_\_\_\_ has no petitions,

\_\_\_\_\_ motions or other type litigation pending, that have not been paid, arising out of surety undertakings.

\* This certificate must be executed by an owner or officer of a professional bail company.

**CERTIFICATE OF PROFESSIONAL BONDSMAN (Professional Bail Company)**

9. That there are no persons, including employees, agents or persons with a financial interest in

\_\_\_\_\_  
*(name of professional bail company)*

who have within a period of two (2) years, violated any provisions of the Bail Bond Reform Act, rules adopted by the Supreme Court governing the qualifications of professional surety or bail companies or any court order pertaining to the provisions of these rules.

10. No employee, agent nor any other person having a direct or any indirect financial interest in

\_\_\_\_\_  
*(name of professional bail company)*

is an attorney, a judicial official, a person authorized to accept an appearance bond, or an agent of an attorney or judicial official.

11. Should the Qualifying Power of Attorney for the named agents be terminated or the license of such agent or underwriters be revoked, suspended or cancelled, the affiant herein agrees to promptly notify the court of such action, and the agent's authority to execute appearance bonds shall be withdrawn until otherwise qualified pursuant to Rule 7, ARCrP or the Bail Bond Reform Act.

**I HAVE NOTICE THAT FALSE STATEMENTS ARE PUNISHABLE AS PERJURY AND CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.**

Sworn to and subscribed before me this

\_\_\_\_\_  
Affiant's Signature

\_\_\_\_\_  
date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Clerk of the Circuit Court

\_\_\_\_\_  
Telephone Number

**IF THIS REQUEST FOR AUTHORIZATION TO BE A PROFESSIONAL BONDSMAN IS GRANTED, IT IS UNDERSTOOD:**

1. that the court at any time on its own motion may, or on verified motion of the district attorney shall, subpoena for examination under oath any officer, agent, or person having a financial interest in the applicant or other persons, and all relevant books, records, tax returns, and financial data, concerning matters relating to the foregoing certificates;
2. that authorization to act as a professional bondsman may be revoked or withheld by the court for violation of any provision of the Bail Bond Reform Act or Rule 7, ARCrP, for supplying false or inaccurate information contained in the foregoing certificate for failure to submit subpoenaed documents, or for failure of any of applicant's officers or agents, or any other person having any financial interest, direct or indirect, in applicant's bail bond business to answer truthfully all relevant questions asked by the court or the district attorney; and
3. that authorization to act as a professional bondsman pursuant to this certificate must be authorized by order of the presiding circuit judge and shall be valid for only one year from the date of approval, and further that a completed certificate must be filed with the circuit court clerk and approved by the presiding circuit judge each year.

**Attached hereto is a validated copy of a corporate surety bond in the amount of \$25,000 in the county, guaranteeing the payment of all sums of money, up to the limits of the bond, that may become due by virtue of any judgment absolute being rendered against the applicant company on a forfeiture. The bond may be cancelled as to any future liability only by the surety giving thirty (30) days notice in writing to the clerk of this court prior to cancellation.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Telephone Number