

Application Checklist

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Power: \_\_\_\_\_ Amount: \_\_\_\_\_

Power: \_\_\_\_\_ Amount: \_\_\_\_\_

Power: \_\_\_\_\_ Amount: \_\_\_\_\_

Power: \_\_\_\_\_ Amount: \_\_\_\_\_

FOR OFFICE USE

- Defendant Photo and /or D.L.
- Indemnitor Proof of Residence
- Indemnitor Proof of Employment
- Indemnitor Signed
- Defendant Signed
- Premium Received – Prom Note Signed if necessary

Premium Summary

Total Charged: \_\_\_\_\_

Total Received: \_\_\_\_\_

Balance Due: \_\_\_\_\_

Terms: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# EZ Bail Bonds of NJ, LLC

Version 12.5.13

NJ DOBI Lic # 1286431  
(856) 885-6768  
(856) 885-6672 – fax

## Indemnitor / Defendant Facts and Conditions of Bail

Date: \_\_\_\_\_ Date of Arrest: \_\_\_\_\_  
Amount of Bail: \_\_\_\_\_ Power#: \_\_\_\_\_  
Court: \_\_\_\_\_ County: \_\_\_\_\_

*This Box for Office Use*

### DEFENDANT FACTS

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Phone#: \_\_\_\_\_ Is this an Existing Client? \_\_\_\_\_  
Cell#: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_  
Drivers License (state and #): \_\_\_\_\_  
Auto (year/make/color, tag#) \_\_\_\_\_  
Tattoos (describe and location):  
\_\_\_\_\_

EMAIL (for Court Notices):  
\_\_\_\_\_

### DEFENDANT RESIDENCE

Address: (#/street) \_\_\_\_\_  
(city/state/zip) \_\_\_\_\_  
How long at Address? \_\_\_\_\_ Rent/Own (circle)

### DEFENDANT EMPLOYMENT

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Employer Phone #: \_\_\_\_\_ Income: \_\_\_\_\_  
Employer Address: (#/street) \_\_\_\_\_  
(city/state/zip) \_\_\_\_\_ How Long? \_\_\_\_\_  
Hours/Shift Worked?: \_\_\_\_\_

**DEFENDANT FACT SHEET**

1. MOTHER: (name) \_\_\_\_\_  
(address) \_\_\_\_\_  
(phone) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Employment): \_\_\_\_\_
  
2. FATHER: (name) \_\_\_\_\_  
(address) \_\_\_\_\_  
(phone) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Employment): \_\_\_\_\_
  
3. SIS/BROTHER: (name) \_\_\_\_\_  
(address) \_\_\_\_\_  
(phone) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Employment): \_\_\_\_\_  
(phone) \_\_\_\_\_
  
4. SIS/BROTHER: (name) \_\_\_\_\_  
(address) \_\_\_\_\_  
(phone) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Employment): \_\_\_\_\_  
(phone) \_\_\_\_\_
  
5. FRIEND: (name) \_\_\_\_\_  
(address) \_\_\_\_\_  
(phone) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Employment): \_\_\_\_\_  
(phone) \_\_\_\_\_

**INDEMNITOR FACTS**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relationship to Defendant: \_\_\_\_\_

Phone#: \_\_\_\_\_

Cell#: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_

Drivers License (state and #): \_\_\_\_\_

Auto (year/make/color, tag#) \_\_\_\_\_

EMAIL (for Court Notices): _____
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**RESIDENCE**

Address: (# /street) \_\_\_\_\_

(city/state/zip) \_\_\_\_\_

How Long at Address? \_\_\_\_\_ Rent Own (check)

Landlord/Mortgage Company: \_\_\_\_\_

**EMPLOYMENT**

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_ Income: \_\_\_\_\_

Employer Address: (# /street) \_\_\_\_\_

(city/state/zip) \_\_\_\_\_ How Long? \_\_\_\_\_

Hours/Shift Worked?: \_\_\_\_\_

**REFERENCES**

1. Personal Ref: (name) \_\_\_\_\_

(address) \_\_\_\_\_

(phone) \_\_\_\_\_ (cell) \_\_\_\_\_

2. Personal Ref: (name) \_\_\_\_\_

(address) \_\_\_\_\_

(phone) \_\_\_\_\_ (cell) \_\_\_\_\_

**INDEMNITOR (2) FACTS**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relationship to Defendant: \_\_\_\_\_

Phone#: \_\_\_\_\_

Cell#: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_

Drivers License (state and #): \_\_\_\_\_

Auto (year/make/color, tag#) \_\_\_\_\_

EMAIL (for Court Notices):  
\_\_\_\_\_  
\_\_\_\_\_

**RESIDENCE**

Address: (#/street) \_\_\_\_\_

(city/state/zip) \_\_\_\_\_

How Long at Address? \_\_\_\_\_ Rent Own (check)

Landlord/Mortgage Company: \_\_\_\_\_

**EMPLOYMENT**

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_ Income: \_\_\_\_\_

Employer Address: (#/street) \_\_\_\_\_

(city/state/zip) \_\_\_\_\_ How Long? \_\_\_\_\_

Hours/Shift Worked?: \_\_\_\_\_

**REFERENCES**

1. Personal Ref: (name) \_\_\_\_\_

(address) \_\_\_\_\_

(phone) \_\_\_\_\_ (cell) \_\_\_\_\_

2. Personal Ref: (name) \_\_\_\_\_

(address) \_\_\_\_\_

(phone) \_\_\_\_\_ (cell) \_\_\_\_\_

**CONDITIONS OF BAIL**

Both Defendant and Indemnitor must comply to the following conditions as part of their agreement for bail services through EZ Bail Bonds of NJ. Please read (both Defendant and Indemnitor) each condition of bail.

1. Defendant must appear at ALL court dates as required. If a court date is missed, EZ Bail Bonds MUST be notified within 24 hours.
2. Defendant will notify EZ Bail Bonds of any change of address, change of employment, or change in attorney representation.
3. Indemnitor will notify EZ Bail Bonds of any change of address, change of employment, or change in attorney representation.
4. Defendant must check in by phone every Tuesday to EZ Bail Bonds of NJ (starting with the first Tuesday after release). **The Check In number to use is (866) 707-3485.**
5. EZ Bail Bonds reserves the right to check in, with or without prior notice, to defendants home or work until the case is exonerated.
6. EZ Bail Bonds must be notified of any re-incarceration of defendant immediately.

If any part of this agreement or any other agreement made between EZ Bail Bonds and both Defendant and Indemnitor are violated or the defendant violates his conditions of bail thru the State of New Jersey, EZ Bail Bonds WILL request for an arrest warrant to be issued and for the bail to be revoked.

EZ Bail Bonds may, at their discretion, investigate both Defendant and Indemnitors criminal, employment, and/or credit history. This WILL NOT adversely affect either parties credit score. Information gathered is proprietary and kept confidential.

**Agreement to Bail Services**

I (we), the undersigned, request EZ Bail Bonds of NJ to post bail for the above-mentioned defendant. I (we) agree to act as Indemnitor and guarantee the appearance of the defendant to all court appearances, agree to be responsible for the payment of the bail bond premium as well as any recovery or attorney fees in the event of a forfeiture, and agree to be responsible for all actions required by the courts for the defendant. In addition, I (we) understand that the premium for bail services is Non-Refundable (regardless as to whether or not the defendant is held for other charges or is extradited).

I (Defendant) agree to waive my right to extradition in the event of a forfeiture of my Bail Bond(s). I (we) agree that by signing this agreement that we waive our rights to federal and state search and seizure laws with respect to our personal property while the Defendant remains on active bail or forfeited bond. This waiver includes the use of any tracking devices.

**I (we) understand that in the event of forfeiture of the bond(s), I (we) are responsible for payment of 100% of the face value of the bond within 10 days of forfeiture, or to present the defendant within 10 days of bond forfeiture to EZ Bail Bonds of NJ for surrender to the appropriate authority. Confession of Judgment – Upon default of any of the obligations set forth in this agreement, each maker and endorser authorizes and empowers any attorney, Justice of the Peace, or Clerk of Court of Record in any of the jurisdictions in which the makers or endorsers reside, work or own property in the State of New Jersey, or in any other jurisdiction, to enter judgment by confession against such makers and endorsers, jointly and severally, in favor of EZ Bail Bonds of NJ or its assigns, for the full amount due plus all costs of collection, including without limitation court costs and reasonable attorney's fees. Each maker and endorser expressly waives any summons or other process, consents to immediate execution of said judgment, and expressly waives benefit of all exemption laws and presentment, demand, protest, and notice of maturity, and/or protest, and also waives benefit of any other requirements necessary to hold each of them liable as makers and endorsers.**

We, the undersigned, have read and understand all the conditions of this agreement:

<b><u>Defendant</u></b> Signature	Print Name	Date
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<b><u>Indemnitor</u></b> Signature	Print Name	Date
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<b><u>Indemnitor</u></b> Signature	Print Name	Date
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# EZ Bail Bonds of NJ, LLC

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NJ DOBI Lic # 1286431  
52 N Broad Street  
Woodbury, NJ 08096  
(856) 885-6768  
(856) 885-6672 – fax  
[www.EZBailBondsNJ.com](http://www.EZBailBondsNJ.com)

## Authorization for Release of Medical & Employment Records

### CLIENT INFORMATION

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

I, \_\_\_\_\_, authorize the following as a condition of my bail...

1. The release of any and all medical records related to treatment that I may be or have been receiving. This authorization includes any information regarding admittance, scheduled release, type of treatment, and related information.
2. The release of any and all employment information or records from my employer (past or present). This authorization may include any information regarding time of employment, schedule, rate of pay, and related information.

A photocopy or facsimile shall have the same force and effect as an original.

This is a general purpose Authorization for Release of Information and shall apply to any circumstance that EZ Bail Bonds deems necessary.

**I have read the above foregoing Authorization for Release of Information and do hereby acknowledge that I am familiar with and fully understand the terms and conditions of this authorization. I understand that I may not revoke this authorization upon execution.**

\_\_\_\_\_  
**Defendant** Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

# EZ Bail Bonds of NJ

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## Fugitive Fee Contract

This Contract is entered into between EZ Bail Bonds of NJ and the undersigned ("Indemnitor")  
WHEREAS, the Surety has posted bail bond(s) for the:

Defendant: \_\_\_\_\_ ("Defendant")

In the amount of or totaling \_\_\_\_\_

(\$ \_\_\_\_\_)("BOND") - POWER #(s) \_\_\_\_\_

WHEREAS, the Indemnitor has signed an Indemnity Agreement and/or other contracts agreeing to be financially liable to the Surety for items listed in the Agreement and/or other contracts, including the defendants obligation to appear for all scheduled court dates and

WHEREAS, Administrative Code drafted by the New Jersey Department of Banking and Insurance requires that a separate written contract be entered into between the Surety and Indemnitor in order for the Surety to hold an Indemnitor financially responsible for Fugitive Fees.

Now, therefore, the parties agree as follows:

1. "Fugitive Fees" means the actual reasonable expenses incurred in the investigation and apprehension of a Fugitive and any filing fees and court-imposed costs related to an application for the remittance of the previously forfeited bond on that Fugitive. "Fugitive Fees" do not include the amount of any bail forfeiture assessed by a court, and shall not include any attorney fees incurred by the Surety, but may include filing fees and other court imposed costs related to an application for the remittance of the previously forfeited bond.
2. "Fugitive" means a defendant (a) who failed to appear in court as required by the court; (b) for which a bench warrant for arrest has been issued; or (c) whose bail has been forfeited or revoked.
3. Indemnitor, jointly and severally if more than one, shall indemnify and hold harmless the Surety for all Fugitive Fees resulting from or relating to Surety's issuance of the Bond; provided, however, that the Fugitive Fees shall not exceed:
  - a. The greater of \$1,500.00 or 10 percent of the amount of the Bond for a Fugitive who is apprehended or located while in custody within the State of New Jersey; or,
  - b. The greater of \$1,500.00 or 20 percent of the amount of the Bond for a Fugitive who is apprehended or located while in custody outside the State of New Jersey.Notwithstanding any computation to the contrary made pursuant to 3a or 3b above, in no event shall Indemnitors obligations to pay Fugitive Fees exceed 110 percent of the face amount of the Bond.
4. The voucher or other evidence of any Fugitive Fee payment made by the Surety shall be sufficient evidence of such financial liability due the Surety by the Indemnitor. The failure of any Indemnitor to comply with the provisions of this Fugitive Fee contract shall be binding upon the other Indemnitors.
5. The rights and obligations set forth in this Fugitive Fee Contract shall be in addition to and shall supplement the rights of the Surety against the Indemnitor, or as provided by statute or common law.

\_\_\_\_\_  
Indemnitor Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Indemnitor Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



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**Reposting and Attorney Fees**

EZ Bail Bonds of NJ, LLC provides the kinds of services to our clients that far exceed the bail bond industry standard. Some of those services include mailing, texting, and call notifications of any and all court dates to both the Indemnitor and Defendant.

If for any reason a posted bail bond forfeits and reposting of the bond is necessary, the following fees will apply...

1. Standard Premium for the new bond.
2. Municipal – \$189.00 fee for the filing of relief of the forfeited bond from the court.
3. Superior - \$289.00 fee for the filing of a Motion for relief of the forfeited bond from the court.

These fees will be due at time of reposting.

**Consent Order Payments**

If for any reason a forfeited bond was discharged only by Consent Order (payment made to the court in order to discharge), the Indemnitor and Defendant are 100% responsible for the full amount of the Consent Payment, payable to the Surety immediately.

We, the undersigned, have read and understand all the conditions of this agreement:

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Defendant Signature / Printed Name / Date

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Indemnitor Signature / Printed Name / Date

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Indemnitor Signature / Printed Name / Date

# EZ Bail Bonds of NJ, LLC

NJ DOBI Lic # 1286431

## Payment Agreement/Promissory Note for Bail Bond Services

**Recitations:**

Date: \_\_\_\_\_

Borrower (1): \_\_\_\_\_

Phone#: \_\_\_\_\_

Borrower (2): \_\_\_\_\_

Phone#: \_\_\_\_\_

**Payee/Lender:** EZ Bail Bonds of NJ / NJ DOBI Lic#1286431

**Principal Amount:** \$ \_\_\_\_\_ **Term:** \_\_\_\_\_ (Weekly/Bi-Weekly/Monthly)

**Payment Amount:** \$ \_\_\_\_\_ **First Payment Due Date:** \_\_\_\_\_

**Interest Rate:** "0" Percent.

**Form of Payment:** Payments are to be made by credit card or debit card form, processed by EZ Bail Bonds of NJ as agreed on the attached Credit Card Authorization Form, or otherwise agreed to by both parties. Cash, Money Order, or Bank Check may be accepted in lieu of weekly credit card payment, so long as payment was made prior to the next scheduled credit card payment for which the payment was intended.

**Attorney Fees:** If this Note is given to an attorney for collection or enforcement, or if suit is brought for collection or enforcement, or if it is collected or enforced through probate, bankruptcy, or other judicial proceeding, the Borrower(s) shall pay Payee all costs of collection and enforcement, including reasonable attorney's fees and court costs in addition to other amounts due.

**Severability:** If any provision of this Note or the application thereof shall, for any reason and to any extent, be invalid or unenforceable, neither the remainder of this Note nor the application of the provision to other persons, entities or circumstances shall be affected thereby, but instead shall be enforceable to the maximum extent permitted by law.

**Governing Law:** This Note shall be governed, construed and interpreted by, through and under the Laws of the State of New Jersey.

**Security:** To Protect the Lender, borrower(s) give what is known as security interest or mortgage in: (Describe)

Borrower is responsible for all obligations represented by this Note. Agreed to:

\_\_\_\_\_  
Borrower (1) Signature / Printed Name

\_\_\_\_\_  
Borrower (2) Signature / Printed Name

\_\_\_\_\_  
EZ Bail Bonds of NJ Authorized Agent

\_\_\_\_\_  
Date

# Privacy Disclosure Notice

**THIS NOTICE IS FOR YOUR INFORMATION. IT IS PROVIDED ON BEHALF OF SENECA INSURANCE COMPANY and EZ Bail Bonds of NJ, LLC. NO RESPONSE IS REQUIRED.**

We believe in protecting the confidentiality and security of any Nonpublic Personal Information that we collect about our customers. Nonpublic Personal Information generally means information that is provided by you or is obtained by us in the course of underwriting a bail bond. It does not include information available to the general public. Please read this notice to learn how we will handle Nonpublic Personal Information.

## **The Nonpublic Information That Seneca Collects**

We collect information about you from the following sources (examples under each source are not necessarily a complete list):

- **Application Information:** This is information we receive concerning you on applications or other forms. It may include your name, address, and telephone number, social security number, date of birth, length of employment and gender. It may also include information about your credit from a credit reporting agency.

## **The Nonpublic Information That We Disclose:**

We will not disclose any Nonpublic Personal Information about you to any affiliated or non-affiliated third parties except as permitted by law. To the extent that we are permitted to disclose Nonpublic Personal Information about you to affiliated or non-affiliated third parties, we may disclose all of the Nonpublic Personal Information described above. For example, Nonpublic Personal Information may be disclosed to others to enable them to provide business services for us, such as performing general administrative activities for us, and assisting us in processing a transaction requested by you. Information may also be disclosed for audit or research purposes or to law enforcement and regulatory agencies, for example, to help prevent fraud.

**This notice is in conjunction with the following Client:**

Defendant \_\_\_\_\_

We treat Nonpublic Personal Information in a confidential manner. Employees are required to protect the confidentiality of Nonpublic Personal Information and may only access Nonpublic Personal Information when there is an appropriate reason to do so.

## **Former Customers**

Even if you are no longer a customer, our Privacy Policy will continue to apply to you. The undersigned hereby acknowledges receipt of this Privacy Disclosure Notice.

\_\_\_\_\_  
Defendant Date

\_\_\_\_\_  
Indemnitor Date

\_\_\_\_\_  
Indemnitor Date

**INDEMNITY AGREEMENT FOR SURETY BAIL BOND**  
**SENECA INSURANCE COMPANY, INC.**  
**160 Water Street, 16th Floor, New York, New York 10038**

The undersigned, called "First Party," make application to **EZ Bail Bonds of NJ, LLC** called "Second Party," for execution by SENECA INSURANCE COMPANY, Inc., a corporation called "Surety" of a Bail Undertaking herein referred to as "Bail Bond" in the penal amount of \$ \_\_\_\_\_ for \_\_\_\_\_ called "Principal," and in consideration of Second Party arranging for execution of continuance of this Bail Bond, First Party does jointly and severally agree as follows:

FIRST: To pay Second Party \$ \_\_\_\_\_ per annum (where applicable) for the Bail Bond. The premium is fully earned upon the release of Principal. The fact that Defendant may have been improperly arrested or his bail reduced or his case dismissed shall not obligate the return of any portion of said premium. This bond is renewable each year if applicable to your State. First Party agrees to pay to Second Party a renewal premium in the amount stated above, twelve months after the date on which this bond was executed. If said renewal premium is not paid upon written demand, Second Party or Surety has the right to surrender Principal and exonerate the bond pursuant to state regulations.

SECOND: To reimburse Second Party and Surety for actual expenses incurred by Second Party or Surety in connection with the arranging and/or execution of Bail Bond or substitution thereof whether or not said Principal refuses to be released after arrangements have been initiated by Second Party, in accordance with the regulations of the Insurance Commissioner in effect at the time such expenses are incurred.

THIRD: To reimburse Second Party and Surety for actual expenses incurred and caused by a breach by the Principal of any of the terms for which the application and Bail Bond were written not in excess of the penal amount of the Bail Bond, plus any reasonable expenses or liabilities incurred as a result of searching for the recapturing or returning Principal to custody, incurred by Second Party or Surety or as necessary in apprehending or endeavoring to apprehend Principal, including legal fees incurred by Second Party or Surety in making application to a court for an order to vacate or to set aside the order of forfeiture or Judgment entered thereon.

FOURTH: To pay the Second Party or Surety, in the event that it is necessary for them to institute suit for a breach of this agreement, a reasonable attorney's fees.

FIFTH: To pay Second Party or Surety as collateral upon demand, the penal amount of Bail Bond whenever Second Party or Surety, as a result of information concealed or misrepresented by the First Party or Principal or other reasonable cause, any one of which was material to hazard assumed, deems payment necessary to protect the Second Party or Surety hereunder. Where, as a result of judicial action, bail has been increased, and no collateral or insufficient collateral, in the sole discretion of Second Party or Surety, is furnished to indemnify against such increase in the bail, Second Party or Surety may demand such collateral as will indemnify them against such increased bail.

SIXTH: To pay Second Party or Surety immediately upon demand for any default or breach of the terms and conditions included herein.

SEVENTH: To aid second Party or Surety in securing release or exoneration of Second Party or Surety from all liability under Bail Bond, including the surrender of Principal to Court should Second Party or Surety deem such action advisable.

EIGHTH: That all money or other property which the First Party has deposited or may deposit with the Second Party or the Surety may be applied as collateral security or indemnity for matters contained herein, and to accomplish the purposes contained herein, the Second Party and/or Surety is authorized to lawfully levy upon said collateral in the manner provided by law and to apply the proceeds there from and any and all money deposited to payment or reimbursement for the herein above liabilities, losses, costs, damages and expenses. If collateral received by Second Party is in excess of the bail forfeited, such excess shall be returned to the depositor immediately upon the application of the collateral to the forfeiture, subject to any claim of Second Party and Surety for unpaid Premium or the herein above charges.

NINTH: Second Party or Surety shall not surrender Principal to custody prior to the time specified in the Bail Bond for the appearance of the Principal, or prior to any occasion when the presence of the Principal in Court is lawfully required, without returning all premium paid. Unless, the surrender is a result of judicial action, information concealed or misrepresented by the Principal or other reasonable cause, any one of which was material to the hazard

assumed, the hazard was substantially increased the additional premium, if any, for such increased hazard was not paid within a reasonable time.

TENTH: The obligations hereunder are joint and several and any amounts due shall bear interest at the maximum rate of interest allowed by law. The Second Party and the Surety shall not be first obliged to proceed against the Principal on Bail Bond before having recourse against the First Party or any one of them. Prior to foreclosure, bond collateral, including any cash collateral deposited, Surety will notify second party that the forfeiture has been issued and that it is the intent of the Surety to foreclose against any collateral taken.

ELEVENTH: In making application for Bail Bond, each of us warrants all statements made by him or her on this application to be true, and we agree to advise Second Party or Surety of any change, including but not limited to change of address or employment of either the Principal or of any of the first Party, or any other material change in circumstances, within forty-eight (48) hours after knowledge such change shall have occurred, and the first Party agrees that any failure to so notify shall be reasonable cause for the immediate surrender of the Principal.

TWELFTH: The undersigned agree that these obligations apply to all other Bail Bonds executed for the same charge for which the above mentioned Bail Bond was executed, or of any charge arising out of the same transaction, regardless of whether said Bail bonds are filed before or after conviction, but not in a greater amount.

FURTHER, by signing below, I hereby authorized Seneca Insurance Company, its attorney-in-fact or independent contractor to obtain a report of my credit history or other information required in fulfilling the obligations of the contractual agreement which we have entered into.

IN WITNESS WHEREOF, the First Party whose names are subscribed to the Indemnity Agreement executed herewith each represents; I have read the Indemnity Agreement and I know the contents thereof; that I hereby acknowledge receipt of a copy of said Indemnity Agreement; that I am the true and lawful owner of the property, whether real or personal, which if set forth in the Application for Bail (which Application is made a part hereof by reference as though herein fully set forth) is my property and that I own such property free and clear of all liens or encumbrances except as so noted, and I further promise not to transfer or encumber any of said property until my liability on said Indemnity Agreement has been released. I understand the Second Party and/or Surety is permitting the said bail to remain in force upon reliance of the statements made by me and I do hereby

This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_ set my hand.

\_\_\_\_\_  
Indemnitor

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Indemnitor

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Agent (Witness)

\_\_\_\_\_  
Print Name