## A-COPA Bail Bonds COPA Bail Bonds/ San Antonio Bail Bonds

1511 W. Martin/2969 W. San Antonio San Antonio TX 78207/ New Braunfels TX 78130 210-231-0202/ 830-625-4466

## Requirements for Bail Bond(s)

To Whom It May Conce	ern	:
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COPA Bail Bonds San Antonio Bail Bonds

Please fill in and sign the Cosigner/Indemnitor application information sheet and Plain Talk Contract. Please send a scan or copy of your driver's license and a utility bill (water bill, electric bill, gas bill, cable bill) for proof of address. Send this information by fax to (210) 231-6229 or email to bailbondpeople.com as soon as possible and the originals by mail.

The fee for bail bond(s) is	s \$			<b>_·</b>					
he/she is released.	_ will b	e expla	ined	the	conditions	of	his/her	release	when
Respectfully,									
A-COPA Bail Bonds									

Contract Date:	
Bail Bond Fa	ace Value Amount:
Bail Bond Premi	um Amount(s):\$
Criminal Cause I	No:
	<u>Contract</u>
I/We,	
Indemnitor(s)/Cosigners/Guarantor(s),	today, enter into this Contract with (A) COPA BAIL BONDS/San
Antonio Bail Bonds, Surety,	for the benefit of obtaining the release, Principal/Defendant. I/We understand that by my/us
	d above and signing the bond as Guarantor(s) that Surety will ected, and that I/We will be and am/are responsible for insuring
that the Principal/Defendant appears in	n court each and every time that this cause(s) is scheduled for
court. I/We further understand that if	the Principal/Defendant fails to follow any and all instructions
or orders of the Court or fails and refu	ses to appear in court on any of the scheduled court dates and
incurs a bond forfeiture, that I/We wil	Il be required and <b>responsible</b> for paying the Surety the full
	namely;
	II face value of the bail bond(s) to the Surety in
	efendant fails to appear in court as scheduled. By
	nnitor(s)/Guarantor(s) as mentioned above agree to be bound
	hall give notice to Indemnitor(s)/Guarantor(s) of the
•	r by certified mail return receipt requested (to the address of
•	ow or provided) for demand for payment of the full face value
of the bond(s) due to Principal/Defend	
	d that the premium owing and/or paid on this
	pon the release of the Principal/Defendant from
	Defendant may have been improperly arrested, or his/her bail
-	, shall not obligate the return or forgiveness of any portion of
the premium/(s) paid.	, shall not obligate the retain of lorgiveness of any portion of
, , , , ,	ties as evidenced by their signatures below on the day
of, 20	J
(A) COPA BAIL BONDS/San Ant BY:	conio Baii Bonds
	X
A BAIL BONDS	Y Principal/Defendant
Antonio bail bonds	Y
I W. MARTIN NANTONIO TX 78207	XIndemnitor/Guarantor
210-231-0202/ 210-231-6444	v
	XIndemnitor/Guarantor
210-231-6229	Indemnitor/ Guarantor
210-231-6229  OPA Bail Bonds  9 W. San Antonio	ted name:
OPA Bail Bonds	

## COSIGNER/INDEMNITOR APPLICATION FOR SURETY BOND

A. If Defendant/Indemnitor make any false statement on this application, the bond(s) will or may be surrendered at the option of the bonding company. \_\_\_\_\_ Nickname/Alias/Stage Name\_\_\_ \_\_\_\_\_\_Nationality \_\_\_\_\_\_US Citizen Yes or No \_\_\_\_\_ Place of Birth \_\_\_\_\_ Date of Birth If No, list resident alien # \_\_\_\_\_ Relation to Defendant:\_\_\_\_ Address where you reside \_\_\_\_ Address Apt#, City, State, (Circle one) Buying, Renting, Leasing, living with Family/ Landlord, Mortgage Co. or Complex Name? \_\_\_\_\_\_ Permanent Mailing Address? \_\_\_\_\_\_\_ Name Utilities are in \_\_\_\_\_ Home Phone # \_\_\_\_\_ Cell Phone #\_\_\_\_ Email address/ MySpace/ Facebook/Twitter? \_\_\_\_ Military Background \_\_\_\_\_\_Social Security #\_\_\_\_\_State ID or Driver's Lic. #\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_ Color Eyes \_\_\_\_\_ Hair \_\_\_\_ Circle One Right or Left Handed Glasses **Yes or No** Contacts **Yes or No** Complexion or Skin Tone List Special Skills, Carpentry, Framer, Recreational activities Frequented \_\_\_\_\_ List all hang outs including: clubs, fraternities, bowling leagues, etc. \_\_\_\_\_ **EMPLOYMENT:** Place of employment \_\_\_\_\_\_ Job title or description \_\_\_\_\_ \_\_\_\_\_\_Work Phone# Employer's address Supervisor's Name \_\_\_\_\_ Previous Employer \_\_\_\_\_ JobTitle \_\_\_\_\_ How long? \_\_\_ If Unemployed, list how you support yourself (examples: side jobs w/whom, how much SSI received, or other government aid) FINANCIAL INFORMATION: \_\_\_\_\_ Credit Union \_\_\_\_\_ Name of Bank \_\_\_\_\_ Name of Credit Card\_\_\_\_\_\_ Acct # \_\_\_\_\_ Exp. Date AUTOS: \*\* If you don't own a vehicle please list one that you would borrow or someone who would give you a ride? \_\_\_\_\_\_\_Color \_\_\_\_\_\_ Plate # \_\_\_\_\_ Year/Make/Model \_\_\_\_ \_\_\_\_ Color \_\_\_\_\_\_ Plate # \_\_\_ Year/Make/Model \_\_\_ ARREST/CONVICTION RECORD: HAVE YOU EVER BEEN ARRESTED, ANYWHERE? YES OR NO If so state details, when, where (County?), charge(s) and if plead guilty or dismissed? \_\_\_\_

Are you on bond for other charges? Yes or No If so, company & charges?

Name of your Attorney/Law Firm \_\_\_\_\_\_ Ph# \_\_\_\_\_ Have you paid fee: **YES OR NO** 

Have you ever FAILED TO APPEAR in court or SIGNED for somebody who did? YES OR NO; Details

Are you on **Probation:** Yes or No Are you on **Parole:** Yes or No

What bonding company(s) have you used before? \_\_\_

Cosignor/ Indemnitor Info		Street	City	Sta	ite/Zip	Phone	
Father/ Name:					-		
	İ						
fother/Name:							
Bro/Sis/Name:							
Other Relatives/Name:							
Closest Friend/Name:		- 0-10-10-					
•							
riend/ Name:							
riend/ Name:							
Coworker/Name:							
over the state of							
(Circle One)							
Spouse/Common Law/Girlfrie	na/Boytrien	<b>a</b> First	Middle	e	Last		
Address							
-tudi ess			MODIII	e Filone			
Date of Birth	Social Secu	rity #		_ State ID or Driver	's Lic. #		
Employment			Job Title/Position	n/Description			
Employer's Address		Work	: <b>#</b>		How long?		
Spouse's Family & Friends	:	Street	City	State	P	Phone	
Father/ Name:			<u> </u>				
,							
Mother/Name:							
Facilia Manufactura Nama							
Family Member Name:							
					Revis	sed © 08/04/11ap.pc.	
CHILDREN	AGE	ADDRESS (IF	DIFFERENT)	PHONE	SCHO	OOL & GRADE	
Name							
Name							
		RELEASE OF IN	FORMATION				
The individual (aka defendant/indem	nitor) signing h	ereby warrants that the	e foregoing declara	tions made and answe	ers given are	the truth witho	
reservation and are made for the pu							
nerein, with the intent and purpose bankers, the Federal Social Security							
Forces, the State Division of Motor Ve	hicles, all Munic	ipal, County, State and	Federal Law Enforce	ment Agencies and an	y other persor	ns or organizatio	
naving information concerning the de Bail Bonds and apprehension for Cour							
nonappearance. The Defendant/ I	ndemnitor her	eby waives his or he	r rights with resp	ect to the Privacy A	ct and autho	orizes the use	
copies of this document by A-CC release will serve to exonerate yo							
release will serve to exonerate yo Bonds/San Antonio Bail Bonds wh	nich may be im	posed upon by Title 5		the United States Co	ode, commo		
		municipal law govern	ing the release of	information. This re	elease is vali	id for a period	
		municipal law govern	ing the release of	information. This re	elease is vali	id for a period	
Privacy Act, or any comparable fe ten (10) years from execution dat		municipal law govern	ing the release of  Agent/Witness_	information. This re	elease is vali	d for a period	

Cosigner/Indemnitor Signature \_\_\_\_\_\_Mailing Address \_\_\_\_\_