LEXINGTON NATIONAL INSURANCE CORPORATION

CONFIDENTIAL APPLICATION FOR BAIL BOND (All Questions Must Be Answered in Full)

1.	Name	Residence I	Phone #
	AliasNickname	Pager #	Cell#
	Address		How Long?
	Employer	Phone #	How Long?
	Former Employer	Phone #	How Long?
	D.O.B	Where?	How long in this county?
	SexRaceHeight_	Weight Eyes	Hair Complexion
	Occupation		
	Spouse's Name	Employer & Phone	How long married? _
3.	Children - Age - School		
7.	Own or rent home	From Whom?	
Mother Brother Sister Brother-in- Sister-in-L	Full description of auto		Tag No
	Where financed		Amount Owed
Э.	Dr. Lic	S.S	Life Ins. Co
10.	Name and number of any labor union, club,	lodge, or etc.	
11.	List all previous arrests		
12.	Bonded before by		Still indebted
	NAME		ADDRESS - PHONE
/lother_			
Brother_			
3rother_			
ister			
3ister			
	n-Law		
	-Law		
	n-Law		
TIETIU _			
NOTES:			

COLLATERAL RECEIPT AND INFORMATIONAL NOTICE

DO NOT LOSE THIS RECEIPT

DATE:	:				RECEIPT NO.: C-FL- 3366		
1.	RECEIVE	ED FROM:					
2.	ADDRES	S:					
3.	PHONE N	NOS.: HOME	JOB		SOC. SEC.#		
ŀ.	The person(s) named on line one (1) above has deposited the collateral or executed the collateral documents check below: Collateral to be held by: () M.G.A. () Bail Agent () Insurer						
	() Indem () Mone	nnity Agreement y in the amount of \$	() Promis	sory Note	() Mortgage Deed and Promissory Note		
	() Cash:	\$	AND/OR () Check	No	dollars by in the amount of \$		
	() Other	collateral:					
		re collateral is placed or the following:	as security for the b	ond(s) and for	lawful costs incurred due to underwriting the		
5.	DEFEND	ANT:	POWER NOS.				
S. -							
7. DEOE					E(S): LEXINGTON NATIONAL INSURANCE CORF		
HEUE	INED BA:	Attorney in Fac	ct. in Trust for:		egton St., Suite 501, Baltimore, MD 21202 • (410) 625-0800		
e bail bo	e will be returned or and(s) has been disch	nly to the person(s) named on line	one (1) above. Collateral, except to all lawful costs incurred by the sur-	nent is accepted and acknowled for those documents the	owledged by the surety agent and the surety company named above, the collater surety must retain as directed by the law, will be returned within 21 days afti		
8.	х	DEPOSITOR'S S	IGNATURE	$ \bigcirc$ $-$	DEPOSITOR'S SIGNATURE		
		DEI CONORTO C	IGNATOTIE		DEI CONORG GIGNATORE		
ho undara	siamed baroby current		PT FOR RETU		LLATERAL al listed above. The collateral has been returned in good and sufficient conditions.		
		ves the surety agent and the surety of					
9.	DATE:	I/V	le have received the	items listed be	elow:		
		TOTAL AMOUNT RE	TURNED	\$			
		Other collateral return	med				
Receiv	ved by:			Received by:			
			INFORMATIO	ONAL NOT	ICF		
COND	OITIONS OF				d and shall have the right to apprehend, arrest and surrender the principal to the prop		
·. <u>2</u> .	officials at any tin	ne as provided by law.			and shall have the right to apprehence, anest and solutioned the philospal to the prop as enumerated below in paragraph 3, then principal shall be entitled to a refund of the		
 3.	bond premium.				obligations to the SURETY hereunder, and the SURETY shall have the right to forthwi		
	apprehend, arres (a)	st and surrender principal, and principa If principal shall depart the jurisdiction	I shall have no right to any refund of pr of the court without the written consen	remium whatsoever. Said e it of the court and the SURE	events which shall constitute a breach of principals' obligations hereunder are: ETY or its Agent.		
	(b) (c)	If principal shall move from one addres If principal shall commit any act which	shall constitute reasonable evidence o	of principal's intention to cau			
	(e)	If principal is arrested and incarcerated If principal shall make any material fals	i for any other offense other than a mir e statement in the application.	or traffic violation.			
OTHE	R CONDITION	ONS:					
					() NO DATE SET		
50011	11 DAIL	3 110	·	FLAUL	() NO DATE SE		
			×_				
				P	PRINCIPAL'S SIGNATURE		
			INDEMNITOR	INFORMA	TION		
n addition	to the terms and a	Shape of any Indonesia Assessa	_				
n addition t L. 2.	The indemnitor(s	s) is responsible for any and all losses	ing before the court named in the bo or costs of any kind whatsoever whic	nd, at the time therein fixed th the surety may incur as) notify you that: d, and as may be further ordered by the court. a resuft of this undertaking, and any collateral or indemnity give shall also guarante s) does not violate the conditions of the bond and appears on time at all required co.		
ì.	hearings.				s) does not violate the conditions of the bond and appears on time at all required consumptions of the bond of the condition of the conditions of the con		
					ore the court discharges the surely bonds.		
					,		
		FOR CO	MPLAINTS OF	RINQUIRIE	ES CONTACT		
AGEN	ICY						
					Florida Department of Financial Services		
					Bureau of Consumer Assistance		
					.arson Building Fallahassee, Florida 32399-0300		
					-800-342-2762		

LEXINGTON NATIONAL INSURANCE CORPORATION
200 East Lexington Street, Suite 501, Baltimore, Maryland 21202
(410) 625-0800

CONTINGENT PROMISSORY NOTE

\$, Date:	City/State:then are promise to pay to the order	r of
Lexington National Insurance Corporation wilt call date until fully paid. Interest payable semi-annually. The agrees to waive demand, notice of non payment and protest: a	control and severally if more than one, promise to pay to the order DOLLARS, it interest thereon at a rate of percent, per annum finaker(s) and each endorser (if any) of this contingent promissory and in case suit shall be brought for the collection hereof, or the sample attorney's fees and assessable costs. for making such collection, per annum, payable semi-annually.	, at from note ame
It is further agreed and specifically understood that this conting	gent promissory note shall become null and void in the event the shall appear in the proper court at the time or times so directed igations under the appearance bond or bonds posted on behalf of	d by
Witness	(S) (S	(eal)
		,
Date	(S	ieal)
INDEMNIT	TY AGREEMENT	
request of the undersigned, and upon the security hereof, has a in the sum of	TION, a Maryland corporation (hereinafter called the SURETY), at or is about to become SURETY on an appearance bond for	rtain
bond or undertaking, which bond or undertaking and the applica expressly incorporated herein:	ation made to the SURETY and/or its Agent in connection therewith	ı are
NOW THEREFORE, in consideration of the premises an	nd the sum of one dollar in hand paid, receipt whereof by each of a more than one, do hereby undertake, agree and bind themselves,	
be ordered by said court. The undersigned represent and warra the said bond or undertaking is true and correct. 2. That the undersigned will at all times indemnify and demand, liability, cost, charge, counsel fee, expense, suit order, may for any cause at any time sustain or incur, by reason or in co and will, upon demand, place with the said SURETY the requisite expense, suit, order, judgement or adjudication against it, by reas 3. That the voucher or other evidence of any payme conclusive evidence of such payment against the undersigned at the extent of the liability thereof to the said SURETY. 4. That the said SURETY may withdraw from its Su as provided by law. 5. That the agreement shall not be returned by the liability under said bond or obligation, but shall be retained as see 6. That the failure of any of the undersigned to binding upon the others. 7. In connection with the said bond or undertaking, in information for reimbursement pursuant to the indemnity obligation any and all rights they may have under Title 28 Privacy Act-Free local or State law, and the undersigned further consent to and a public information and/or records concerning the undersigned reederal), including, but not limited to, credit reports, Social telephone records, medical records, school records, worker corr reservation, any party or agency, private or governmental (local, and all private and public information and records in their possess that a copy of this document shall serve as evidence of said auth 8. If any provision or provisions of this instrument	comply with the provisions of this agreement of indemnity shall including but not limited to, verifying information provided and/or obtain herein contained, the undersigned, jointly and severally, do hereby we adom of Information Act, Title 6, Fair Credit Reporting Act, and any authorize the SURETY, and/or its Agent, to obtain any and all privated from any party or agency, private or governmental (local, Sal Security Records, criminal records, civil records, driving records, and employment records. Each authorizes, with State, Federal), contacted by SURETY, and/or its Agent, to furnish sion concerning the undersigned to SURETY, and/or its Agent, and dis	n for laim, all or king, I fee, ame. all be as to be fit, of its lining vaive such that or state, ords, thout an any rects ag its
SIGNED, SEALED AND DELIVERED at	, this day of	,
WITNESSES		
	Sign: 🗶 🥠 (c	(leas
	Print:	
	Sign(x) (s	
	Print:	
STATE OF, COUNTY OF	: day of	hv
	, who is/are personally known to me or who has/have produ	
	as identification and who did/did not take an o	
	NOTARY PUBLIC:	
G	Sign:	
E N	Print:	
C	Print:	