

DAVID STERN INDEMNITOR APPLICATION

Print Full Legal Name: _____

Address: _____

Mailing Address (if not same as above): _____

Email Address: _____

Cell Phone Number: _____

Home Phone Number: _____

Social Security Number: _____

Date of Birth: _____

Driver's License Number: _____

State Issued: _____ Exp: _____

Place of Employment: _____

Phone Number: _____

Employers Address: _____

Length of Time Worked: _____

Supervisor's Name: _____

Supervisor's Phone Number: _____

Emergency Contact Name: _____

Phone Number: _____

Marital Status: _____

Spouse' Name: _____

Spouse' Employer: _____

Phone Number: _____

Own Property: Home: _____ Boat: _____ Auto: _____ Land: _____

Auto: Year: _____ Make: _____ Model: _____ Color: _____ Tag: _____

Defendant's Full Legal Name: _____

Defendant's Address: _____

Defendant's Home Phone: _____

Defendant's Cell Phone: _____

Length of Time Knowing Def: _____

Relationship to Def: _____

Personal References:

Name: _____ Address: _____ Phone Number: _____

Name: _____ Address: _____ Phone Number: _____

Name: _____ Address: _____ Phone Number: _____

As the Indemintor, I fully understand my responsibilities in signing the necessary paperwork along with the defendant **within 72 HOURS of release from jail.**

The Bond Premium is NON REFUNDABLE

The undersigned further authorizes Any Person, Agency, Partnership, or Corporation having any information concerning my character and financial reputation to release such information to David Stern Bail Bonds. The undersigned hereby releases Such Person, Agency, Partnership, or Corporation from any liability which may be incurred in releasing the information to David Stern Bail Bonds including liability under Federal Law.

Indemnitor's Signature: _____

Date: _____