

BAIL BOND APPLICATION & CONTRACT

Connecticut Bail Bonds Group, LLC
141 Weston Street, #435
Hartford, CT 06101
(860)420-2245 (203)572-5245

Bond Amount \$ _____
Premium Amount \$ _____
Amount Paid \$ _____
Balance Due \$ _____

DEFENDANT'S INFORMATION

NAME: _____
(FIRST) (MIDDLE) (LAST)
NICKNAME/STREETNAME/ALIAS: _____
DATE OF BIRTH: _____
SOCIAL SECURITY NUMBER: _____
ADDRESS: _____ Apt. # _____
CITY: _____ **ST:** _____ **ZIP:** _____
PHONE: (____) _____ **CELL:** (____) _____
E-MAIL: _____
EMPLOYER/OCCUPATION: _____
ADDRESS: _____
CITY: _____ **ST:** _____ **ZIP:** _____
PHONE: (____) _____
SHIFT/HOURS: _____ **TO** _____
DRIVER'S LICENSE OR ID # _____ **STATE** _____
EYE COLOR: _____ **HAIR:** _____ **HEIGHT:** _____ **WEIGHT:** _____
RACE: _____ **PLACE OF BIRTH:** _____ **MOTHER'S MAIDEN NAME:** _____
SCARS - MARKS - TATTOOS - MENTIONABLES: _____

SPOUSE/PARTNER/GIRLFRIEND/BOYFRIEND'S INFORMATION

NAME: _____
(FIRST) (MIDDLE) (LAST)
NICKNAME/STREETNAME/ALIAS: _____
DATE OF BIRTH: _____
SOCIAL SECURITY NUMBER: _____
ADDRESS: _____ **APT#** _____
CITY: _____ **ST:** _____ **ZIP:** _____
PHONE: (____) _____ **CELL:** (____) _____
E-MAIL: _____
EMPLOYER/OCCUPATION: _____
ADDRESS: _____
CITY: _____ **ST:** _____ **ZIP:** _____
PHONE: (____) _____
SHIFT/HOURS: _____ **TO** _____

CHILDREN:

AGE: _____ **NAME /ADDRESS:** _____ **SCHOOL/EMPLOYER:** _____ **PHONE:** _____

AUTO YEAR _____ **MAKE** _____ **MODEL** _____ **COLOR** _____ **PLATE** _____

ATTORNEY: _____ **ADDRESS:** _____ **PHONE:** _____

PREVIOUS CHARGES: _____ **WHEN:** ___/___/___ **WHERE:** _____

ON PROBATION/PAROLE? _____ **WHERE:** _____ **PROB OFF:** _____

REFERENCES (PEOPLE WHO KNOW THE DEFENDANT):

NAME (FIRST & LAST)	ADDRESS, CITY, STATE, ZIP	PHONE NUMBER	RELATION

I declare under penalty of perjury that the above information is the truth to the best of my knowledge.

DEFENDANT'S SIGNATURE _____ **DATE** _____