

Universal Fire & Casualty Insurance Company

3214 Chicago Dr. · Hudsonville, MI 49426
Phone: 800.874.8742 · Fax: 616.662.4460

CONFIDENTIAL APPLICATION

WARNING – PLEASE READ FIRST:

Any person who, knowingly and with intent to injure, defraud or deceive any insurer, files a statement of claim or an application containing any false, incomplete or missing information is guilty of a felony of the third degree.
(All questions must be answered in full.)

I, the undersigned, do hereby apply to **Universal Fire & Casualty Insurance Company**, to act as my bail in the amount of \$ _____
in the _____ court of _____ wherein I am charged with _____

and I agree to the following terms and conditions prescribed by the State Insurance Department.

TERMS AND CONDITIONS

The following terms and conditions are an integral part of this application for appearance bond No(s) _____
dated _____ for which **UNIVERSAL FIRE & CASUALTY INSURANCE COMPANY**
or its agent shall receive a premium in the amount of _____ (\$ _____) Dollars, and the
parties agree that the said appearance bond is conditioned upon full compliance of all said terms and conditions and is a part of said bond and application therefore.

- Universal Fire & Casualty Insurance Company**, as bail, shall have control and jurisdiction over the Defendant during the term for which the bond is executed and shall have the right to apprehend, arrest, and surrender the Defendant to the proper officials at any time as provided by law.
- In the event surrender of Defendant is made prior to the time set for the Defendant's appearances, and for reason other than as enumerated below in paragraph 3, then Defendant shall be entitled to a refund of the bond premium.
- It is understood and agreed that the happening of any one of the following events shall constitute a breach of the Defendant's obligations to **Universal Fire & Casualty Insurance Company** hereunder, and **Universal Fire & Casualty Insurance Company** shall have the right to forthwith apprehend, arrest, and surrender Defendant, and Defendant shall have no right to any refund of premium whatsoever. Said events which shall constitute a breach of Defendant's obligation hereunder are:
 - If Defendant shall depart the jurisdiction of the court without the written consent of the court and **Universal Fire & Casualty Insurance Company**, or its agent.
 - If Defendant shall move from one address to another without notifying **Universal Fire & Casualty Insurance Company**, or its agent in writing prior to said move.
 - If Defendant shall commit any act which shall constitute reasonable evidence of Defendant's intention to cause a forfeiture of said bond.
 - If Defendant is arrested and incarcerated for any offence other than a minor traffic violation.
 - If Defendant shall make any material false statement in the application.

1. NAME AND ADDRESS

Name: First _____ Middle _____ Last _____ Suffix _____
Cell Phone _____ Home Phone _____ Email _____
Social Security # _____ Driver's Lic. # _____ Expire Date _____ State _____
Current Address _____ City, State Zip _____
Maiden Name _____ Mailing Address (if different) _____

2. PERSONAL DESCRIPTION / MARKS

Height _____ Weight _____ Eye Color _____ Hair Color _____ Race _____ Sex: Male Female
Date of Birth _____ Place of Birth: City _____ State _____ Are you a U.S. Citizen? YES NO
Scars / Tattoos / Marks: _____

3. EMPLOYMENT

Company Name (Do not write "Self") _____ Work Phone _____
Your Occupation _____ Length of Employment _____
Supervisor Name _____ Work Address _____
Previous Employer _____ Work Address _____

4. MARITAL STATUS

Single Married Divorced Separated Widowed Partner/Engaged Cohab / Roommate
Spouse/Cohab/Partner's Name _____ Cell Phone _____
Spouse/Cohab/Partner's Employer _____ Work Phone _____
Employers Address _____ Occupation _____
Spouse/Cohab/Partner's Date of Birth _____ Social Security No. _____

5. CHILDREN

Child's Name _____ Age _____ Phone _____ School/Job _____
Child's Name _____ Age _____ Phone _____ School/Job _____
Child's Name _____ Age _____ Phone _____ School/Job _____
Child's Name _____ Age _____ Phone _____ School/Job _____

For good and valuable consideration, the undersigned principal hereby agrees to indemnify and/or hold harmless, **Universal Fire & Casualty Insurance Company**, or its Agent for any and all losses not otherwise prohibited by law, or rules and regulations promulgated under any applicable statute.

In addition, the Defendant hereby authorizes and directs his relatives, employers, bankers, the Federal Social Security Administration, the Internal Revenue, the State Department of Disability Insurance, the United States Armed Forces, the State Division of Motor Vehicles, all Municipal, County, State and Federal Law Enforcement Agencies and any other persons or organizations having information concerning the Defendant's whereabouts to give such information to **Universal Fire & Casualty Insurance Company** and its assigns and/or duly authorized representatives. The Defendant understands that any information obtained will be used for the purpose of securing his or her appearance and/or apprehension for Court appearance, and for the purpose of securing reimbursement for any expenses incurred as a result of Defendants non-appearance. The Defendant hereby waives his or her rights with respect to the Privacy Act and authorizes the use of copies of this document by **Universal Fire & Casualty Insurance Company** and its assign and or duly authorized representatives.

In witness whereof, the said Applicant has hereunto signed and sealed these presents this _____ day of _____, 20_____.

Signature of Applicant _____ Witness Signature _____

Printed Name of Applicant _____ Printed Name of Witness _____

6. **CAR / CREDIT REFERENCES**

Car: Year _____ Make _____ Model _____ Color _____ Tag _____
Where Financed? _____ Amount Owed _____
Bank Name _____ Account Type(s) Checking Savings Money Market
Credit Card Company Name _____ Account Type Visa Mastercard _____
Credit Card Company Name _____ Account Type Visa Mastercard _____

7. **RESIDENCE INFORMATION**

How long have you lived at your current address? _____ Do you Own Rent Live with Family Live with Friends
Name on Deed of home _____ Landlord/Mortgage Company Name _____
Phone number of Landlord/Mortgage Company _____

8. **ATTORNEY**

Attorney Name _____ Law Firm _____
Address _____ Phone Number _____

9. **FAMILY INFORMATION**

Father's Name _____ Home Number _____
Address _____ Cell Number _____
Employer _____ Work Number _____
Mother's Name _____ Home Number _____
Address _____ Cell Number _____
Employer _____ Work Number _____
Sibling's Name _____ Home Number _____
Address _____ Cell Number _____
Employer _____ Work Number _____
Grandparent's Name(s) _____ Home Number _____
Address _____ Cell Number _____
Employer _____ Work Number _____

10. **PERSONAL REFERENCES - ALL 3 MUST BE COMPLETED (DO NOT USE FAMILY LISTED ABOVE OR EMPLOYER)**

Name _____ Home Number _____
Address _____ Cell Number _____
Relation to You _____ How long have you known this person _____
Name _____ Home Number _____
Address _____ Cell Number _____
Relation to You _____ How long have you known this person _____
Name _____ Home Number _____
Address _____ Cell Number _____
Relation to You _____ How long have you known this person _____

11. **ADDITIONAL INFORMATION**

Are you currently on another bond (other than this one)? Yes No If yes, with whom? _____
Are you currently on Probation? Yes No If yes, which County? _____
List all other Counties/States that you have been arrested in: _____

Signature of Applicant _____

Printed Name of Applicant _____