



**ALABAMA PROFESSIONAL BAIL BONDING BOARD
LICENSING APPLICATION
2777 Zelda Road
Montgomery, AL 36106**

Application For: Professional Bondsman Professional Surety Bondsman Recovery Agent Owner of Agency Agency Employee

Full Name: _____
 (First) (Middle) (Last) (Social Security Number)

Residential Address: _____
 (Street Address) (City)

 (County) (State) (Zip)

Business Name and Address: _____
 (Name) (Street Address)

 (City) (County) (State) (Zip)

List all Counties you are authorized to execute bonds: _____

Business Phone: _____ Home Phone _____

Cell Phone: _____ Age: _____ Date of Birth: _____

Email Address: _____

List other names you have gone by: _____

Have you ever been convicted (including a nolo contendere plea or guilty plea) of a felony (or criminal offense) in any state or in federal court (other than minor traffic violations) whether or not sentence was imposed or suspended? **If YES, in addition to an affidavit, attach a certified copy of the court records regarding your conviction, the nature of the offense date of discharge, if applicable, as well as a statement from the probation or parole officer.** YES NO

Applicants must complete a certified fingerprint background check from ALEA and NCIC that is not more than 90 days old. This application is on the Board website. Please print out the application and submit to the Board's Office along with the fingerprint card and payment. Any applicant convicted of a misdemeanor or felony in another State must supply a certified copy of a fingerprint background check from the respective State.

List Residence(s) for the past five years, beginning with most recent: (Attach additional page if necessary)

Date From / To	Street Address	City	State

List employment for the past five years, beginning with current employment: (Attach additional page if necessary)

Date From / To	Company Name, Street Address	City	State

Current employer phone number: _____ Supervisor: _____

Have you been licensed as a bail bondsman in this or any other State? YES NO

If yes, list State(s): _____ license number(s): _____

Has your bail bonding license or authorization to write bail ever been suspended or revoked in this State or any other?

If yes, please provide information and documentation as to cause and findings. YES NO

Year last licensed: _____ (Attach additional page if necessary)

Are you a U.S. Citizen? YES NO

Certifying Statement "By virtue of filing this application, I do solemnly swear or affirm that I am of good moral character, and that I understand the instructions and terms as set forth in this application form, that I have personally completed this form, that the information given in this application is true, correct, and complete to the best of my knowledge. I hereby authorize the Alabama Professional Bail Bonding Board to verify any and all information contained in this application, including information maintained in applicable data banks, and to transmit this information to the licensing authority of the state to which this application is made. I authorize the licensing authority of the state where application is submitted to review state files pertaining to my licensure, and all law enforcement records, administrative records, motor vehicle records, and court documents to confirm the accuracy and completeness of the information provided herein. This application and signature shall act as authorization of entities in possession of applicable information to release such information to the licensing authority.

_____ Signature of Applicant

_____ Printed Name of Applicant

_____ Date

Mail signed application with the fees (\$125.00 – application fee , \$10.00 – ID Card fee and \$38.25 – ALEA fee by money order, cashier's check or business check) totaling \$173.25 along with Immigrations Compliance Form and the certified ALEA documentation, copy of driver's license and the 2x2 photo to:

ALABAMA PROFESSIONAL BAIL BONDING BOARD
2777 ZELDA ROAD
MONTGOMERY, AL. 36106