ALABAMA PROFESSIONAL BAIL BONDING BOARD
LICENSING APPLICATION
400 Union Street
Montgomery AL 36130-9440

Application For: **Professional Bondsman ❑ Professional Surety Bondsman ❑ Recovery Agent ❑ Agency Employee ❑**

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

Residential Address:_____
(Street Address) (City)

_____
(County) (State) (Zip)

Business Name and Address: _____
(Business 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: _____

Have you ever been convicted (including a nolo contendere plea or guilty plea) of a felony or a Misdemeanor in any city, state or in federal court (other than minor traffic violations) whether a 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 ❑ ***THIS QUESTION MUST BE ANSWERED***

List other names you have gone by: _____

Applicants must complete an online background check from the company contracted with the Board and must not be more than 90 days old. The link to this application will be emailed once the application has been loaded. Payment for the background is due when the background application is entered. The current price is $40 with a $2 processing fee.

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 bondsperson in this or any other State? YES ❑ NO ❑

If yes, list State(s): _____license number(s): _____ Year licensed: _____

Has your bail bonding license or authorization to write bail ever been suspended or revoked in this State or any other? YES ❑ NO ❑

If yes, please provide information and documentation as to the cause and findings. (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 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 and $10.00 – ID Card fee paid by money order, cashier's check or business check) totaling $135.00 along with Immigrations Compliance Form, a copy of your driver's license and the 2x2 photo to:

ALABAMA PROFESSIONAL BAIL BONDING BOARD
PO Box 309440
MONTGOMERY AL 36130-9440