



44 Cooper Street 110 • Woodbury, N.J. 08096 • 856.853.5566

INDEMNITOR _____ TELE # _____

ADDRESS _____ ZIP _____

CITY _____ STATE _____

RELATIONSHIP TO DEFENDANT _____

D.O.B. _____ S.S. # _____ DRIVERS LIC.# _____

EMPLOYER _____ TELE # _____

ADDRESS _____ ZIP _____

YEARS ON JOB _____ COLLATERAL _____

MARITAL STATUS _____ WIFE'S MAIDEN NAME _____

CHILDREN'S NAMES	AGE	SCHOOL / ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OWN HOME _____ RENT _____ FROM WHOM _____

CAR - YEAR - TYPE - MODEL _____

1. I UNDERSTAND THE PREMIUM IS NOT REFUNDABLE.
2. I UNDERSTAND THAT I MUST NOTIFY BURTON'S BAIL BONDS IF THE DEFENDANT OR I CHANGE ADDRESSES OR TELEPHONE NUMBERS.
3. I UNDERSTAND IF THE DEFENDANT FAILS TO APPEAR IN COURT, I AM LIABLE FOR ALL ATTORNEY'S FEES, COURT COSTS, INVESTIGATOR'S FEES AND THE FULL AMOUNT OF THE BOND.
4. I MUST PROVIDE DOCUMENTATION FROM THE COURT THAT THE CASE IS OVER.
5. I MUST HAVE THE DEFENDANT REPORT WEEKLY BY TELEPHONE.

WITNESS _____ INDEMNITOR _____

IN CONSIDERATION OF BURTON'S BAIL BOND COMPANY POSTING BAIL IN THE AMOUNT OF \$ _____, I/WE _____ PROMISE TO PAY THE ATTORNEY'S FEES, RECOVERY COSTS, INTEREST, AND THE FULL AMOUNT OF BOND \$ _____, IN THE EVENT THAT _____ FAILS TO APPEAR AT ANY STAGE OF HIS/HER COURT APPEARANCE.

DATE _____

WITNESS: _____ INDEMNITOR: _____