



CALIFORNIA BAIL BONDS
 AARON J. MCALISTER
 • PHONE: 800.310.5252 •
 • WWW.CALIFORNIABAILBONDS.COM •



Application for Bail Bond

Applicant Information

Name:

Date of birth:

SSN:

Phone:

Current address:

City:

State:

ZIP Code:

Own Rent (Please circle)

Monthly payment or rent:

How long?

Previous address:

City:

State:

ZIP Code:

Owned Rented (Please circle)

Monthly payment or rent:

How long?

Employment Information

Current employer:

Employer address:

How long?

Phone:

E-mail:

Fax:

City:

State:

ZIP Code:

Position:

Hourly Salary (Please circle)

Annual income:

Personal Reference

Name of a person not residing with you:

Address:

City:

State:

ZIP Code:

Phone:

Relationship:

References

Name:

Address:

Phone:

I authorize the verification of the information provided on this form as to my credit and employment. I understand falsification of the information contained herein constitutes insurance fraud and is a violation of law. I execute this application under penalty of perjury.

Signature of applicant:

Date: