



Your Bond Specialists providing Bail, License, and Notary Bonds to ALL the Hawaiian Islands for more than 40 years

No Collateral Bail Bond Application



550 Halekauwila St., Suite 303 • Honolulu, HI 96813 • voice 808.522.1960 • fax 808.522.1972 • email jim@808bail.com • www.808bail.com

Defendant's name: Tell us about the person needing the bail bond. M F
 Defendant's Social Security # _____ Bail Amount _____ Defendant Birthdate (mm/dd/yy) _____

Defendant's Home Phone _____ Cell Phone _____ Email Address _____

Yes No
Co-signer info: Name of another person to guarantee the bond. Married? _____ Phone _____ Social Security # _____ Email Address _____

Co-signer Address _____ City _____ State _____ Zip _____ Birthdate (mm/dd/yy) _____ Credit Score _____ Est. Net Worth _____

Co-signer Place of Employment or Company Name _____ Position Held _____ Work Phone _____ Relation to Defendant/How Long _____

Do you own your home or other real property? Yes No Market Value \$ _____ Mortgage Balance \$ _____

Yes No
Spouse of Co-signer or 2nd Co-signer Married? _____ Phone _____ Social Security # _____ Email Address _____

Address _____ City _____ State _____ Zip _____ Birthdate (mm/dd/yy) _____ Credit Score _____ Est. Net Worth _____

Place of Employment or Company Name _____ Position Held _____ Work Phone _____ Relation to Defendant/How Long _____

Do you own your home or other real property? Yes No Market Value \$ _____ Mortgage Balance \$ _____

Read carefully and sign. Surety is not agreeing to issue the bond applied for by accepting this application and may decline or require that additional collateral be given to secure any bond to be issued as a result of the application, or that additional documents of guaranty or indemnity be signed. By signing below you are agreeing that faxed signatures are sufficient to bind the contract, jointly and severally, and that the undersigned agree to all the following.

1. Warranty. Each of us warrants that the statements made in this application are true and acknowledge that this application has or will induce the Surety to issue the Bond applied for herein. If any of the statements in this application are false, Surety can cancel the Bond. Each of us authorizes the Surety to investigate all statements made and check our credit.

2. Entities. Everyone signing must sign as personal indemnitor and co-signer in an individual capacity along with their spouse. Do not leave any blanks. If not married, so state. We all agree the surety on the bond may be substituted during this agreement.

3. Premiums, Continuation of Suretyship. Each of us agrees that the premium for the Bond issued, as a result of this application is **FULLY EARNED AND NOT REFUNDABLE** upon issuance of the Bond; pursuant to HRS 804-62. An annual premium must be paid for continuation of the Bond until satisfactory evidence of termination of the SURETYSHIP is provided to Surety. Surety may secure its release from liability under the Bond under any applicable law for release of sureties without liability to the Principal or any of the undersigned. This agreement and any other documents you sign in connection with issuance of the Bond apply to all renewals, continuations, substitutions and extensions of the SURETYSHIP.

4. Indemnity. The undersigned agree, jointly and severally, to pay the Surety, on demand, all payments, losses, expenses and costs, including reasonable attorney's fees, for which Surety becomes liable by reason of the Bond, whether or not Surety has paid such payment, losses, expenses, costs and fees. This indemnity shall include an obligation to deposit with Surety an amount of money sufficient for Surety to reserve for payments, losses, expenses, costs and fees, whether known or unknown, contingent or otherwise, arising by reason of the Bond, if demanded by Surety. Surety shall have exclusive right to determine whether any claim or suit, on the basis of liability, expediency or otherwise, shall be paid, compromised, defended or appealed.

5. Warning! A Bail Bond Is Not an Insurance Policy. A Bond is a credit relationship. All persons who sign below understand that if the Surety makes any payments, incurs expenses or has losses under the Bond that they will have to completely indemnify and pay the Surety for those payments, losses and expenses. **Everyone signing understands and agrees that they cannot be excused from this bond obligation until the defendant named in the bond appears in court every single time the court says they are suppose to and until the case is completely over and until the defendant does everything else the court says they are suppose to do, and that this is a continuing obligation.**

6. Mediation. The parties agree that any claims, disputes and controversies concerning arising out of or relating to this Agreement, shall first be determined by private mediation in accordance with the laws of the State of Hawaii. All parties agree to submit to the jurisdiction of the courts of the State of Hawaii.

Print or type your name here, agreeing to conditions of this form.

X _____
 Personal Indemnitor co-signer as Individual Date (mm/dd/yy)

X _____
 Personal Indemnitor, co-signer as Individual Date (mm/dd/yy)

X _____
 Defendant or additional co-signer as Individual Date (mm/dd/yy)

Print Name

Print Name

Print Name