A-COPA Bail Bonds COPA Bail bonds/ San Antonio Bail Bonds

1511 W. Martin/2969 W. San Antonio San Antonio TX 78207/ New Braunfels Tx 78130 (210) 231-0202/ (830) 625-4466

Requirements for Bail Bond(s)

Steps to Fill Out Paperwork:

Section 1: Contract

COPA Bail Bonds

San Antonio Bail Bonds

- 1. Fill Out Date
- 2. Cosigner Name (Print)
- 3. Defendant (Person in Jail) (Print)
- 4. Bond Amount (Not the Fee)
- 5. Signature(s)
- 6. Cosigner Information (Print)

Section 2: Information Sheet Application for Surety Bond

- 1. Fill out full form
- 2. Don't forget to sign second page!!

Section 3: Credit Card Authorization Form

1. Fill out card information

Along with this paperwork please send a scan or copy of your driver's license and a utility bill (water bill, electric bill, gas bill, cable bill) for proof of address. Send this information by fax to (210) 231-6229. email to bailbondpeoplereport@gmail.com or text to (210) 201-2344 as soon as possible and the original by mail.

information by fax to (210) 231-6229. email to <u>bailbondpeoplereport@gmail.com</u> or text to (210) 201-2344 as soon as possible and the original by mail.
The fee for bail bond(s) is \$
The jailed person will be explained the condition of his/her release when he/she is released.
Any questions please call: (210) 231-0202
*Note if person resides out of town, they must call and make arrangements to meet before leaving town.
Respectfully,
A-COPA Bail Bonds

	Contract Date:							
	Bail Bond Face Value Amount:							
	Bail Bond Premium Amount(s):\$							
	Criminal Cause No:							
	I/We,	<u>Contr</u>	<u>act</u>	mnitor(s)/Cosigners/Guarantor(s)				
	today, enter into this Contract with COPA of obtaining the release of	A BAIL BOND	S/San Antonio I	Bail Bonds, Surety, for the benefi				
	I/We understand that by my/us paying th							
4	Guarantor(s) that Surety will post a bail bond in the amount as reflected, and that I/We will be an am/are responsible for insuring that the Principal/Defendant appears in court each and every time that this cause(s) is scheduled for court. I/We further understand that if the Principal/Defendant fail to follow any and all instructions or orders of the Court or fails and refuses to appear in court on an of the scheduled court dates and incurs a bond forfeiture, that I/We will be required an responsible for paying the Surety the full face value of the bail bond amount(s), namely							
	that the Principal/Defendant fails to appear in court as scheduled. By signing this contract I/We, the Indemnitor(s)/Guarantor(s) as mentioned above agree to be bound by the terms herein. Surety shat give notice to Indemnitor(s)/Guarantor(s) of the Principal/Defendant's failure to appear by certified mail return receipt requested (to the address of Indemnitor(s)/Guarantor(s) stated below or provided) for demand for payment of the full face value of the bond(s) due to Principal/Defendant's failure to appear in court. I/We further understand that the premium owing and/or paid on this bond(s is/are fully earned upon the release of the Principal/Defendant from custody. The fact that the Principal/Defendant may have been improperly arrested, or his/her bail reduced, or his/her case(s dismissed, shall not obligate the return or forgiveness of any portion of the premium/(s) paid. Signed an agreed to by all parties as evidenced by their signatures below on the da of, 20 (A) COPA BAIL BONDS/San Antonio Bail Bonds BY:							
	(A) COLA DATE DONDS/ Sall Allto	no ban bor	nds BY:					

DEFENDANT/COSIGNER/INDEMNITOR APPLICATION FOR SURETY BOND

A. If Defendant/Indemnitor make any false statement on this application, the bond(s) will or may be surrendered at the option

of the bonding company, Nickname/Alias/Stage Name Date of Birth _____ Place of Birth _____ Nationality ____ US Citizen Yes or No If No, list resident alien # ______ Relation to person or are you the Defendant:_____ Address where you reside _____ How Long? _____ Address Apt#, City. State, (Circle one) Own, Buying, Renting, Leasing, living with Family/ Landlord, Mortgage Co. or Complex Name? ______ Permanent Mailing Address? ______ Name Utilities are in _____ Home Phone # _____ Cell Phone #_____ Email address/ Snapchat/ Facebook/Twitter/Instagram_____ Military Background _____Social Security #____State ID or Driver's Lic. #___ Height _____ Weight ____ Color Eyes ____ Hair ___ ___ Circle One Right or Left Handed Glasses Yes or No Contacts Yes or No Complexion or Skin Tone List **Special Skills**, Carpentry, Framer, Recreational activities Frequented _____ Have you ever had a drug/alcohol problem or on medication? _____ **EMPLOYMENT:** Place of employment ______ Job title or description _____ How long? ____ Employer's address _____Work Phone# Supervisor's Name _____ Previous Employer _____ _____ JobTitle _____ How long? If Unemployed, list how you support yourself (examples: side jobs w/whom, how much SSI received, or other government aid) FINANCIAL INFORMATION: Name of Bank _____Credit Union Do you owe/pay child support? Yes or No Name, address, phone of person paying to AUTOS: ** List any vehicles in your household. If you don't own a vehicle please list one that you would borrow or someone who would give you a ride? Year/Make/Model _____ Color _____ Plate # Year/Make/Model Color _____ Plate # ARREST/CONVICTION RECORD: HAVE YOU EVER BEEN ARRESTED, ANYWHERE? YES OR NO If so state details, when, where (County?), charge(s) and if plead guilty or dismissed? Are you on **Probation:** Yes or No Are you on **Parole:** Yes or No Are you on bond for other charges? Yes or No If so, company & charges? What bonding company(s) have you used before? ___ Have you ever FAILED TO APPEAR in court or SIGNED for somebody who did? YES OR NO; Details Name of your Attorney/Law Firm ______ Ph# _____ ____Have you paid fee: YES OR NO

Fined / Name: Closest Friend/Name:	Defendant/ Indemnit	or Info	Street	0:1	17		
Bro/Sis/Name: Other Relatives/Name: Cides Hriend/Name: Friend/ Name: Friend/ Name: Coverker/Name: Coverker/Name: Coverker/Name: Coverker/Name: Coverker/Name: Coverker/Name: Coverker/Name: Coverker/Name: Address Phone Mobile Phone State ID or Driver's Lic. # Imployment Job Title/Position/Description How long? Friend/ State ID or Driver's Lic. # Imployment Job Title/Position/Description How long? From State ID or Driver's Lic. # Imployment Job Title/Position/Description How long? From State ID or Driver's Lic. # Remark Friend/ Name: Friend/ Na	Father/ Name:			City		State/Zip	Phone
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Revised © 06/18/1 HILDREN AGE ADDRESS (IF DIFFERENT) PHONE SCHOOL & GRAD. Be individual (aka defendant/indemnitor) signing hereby warrants that the foregoing declarations made and answers given are the truth with servation and are made for the purpose of inducing the Surety to become surety or to procure surety-bill pont he bond or undertaking applied refein, with the intent and purpose that they be relied on fully. In addition, the defendant hereby authorizes and directs his relatives, employer reces, the State Division of Motor Vehicles, all Municipal, County, State and Federal Social Security Administration, the Internal Revenue Service, the Department of Disability Insurance, the United States Arm ving information concerning the defendant's whereabouts to give such information to any agent of A-COPA Bail Bonds/COPA Bail Bonds/San Anton nappearance. The Defendant/ Indemnitor hereby waives his or her rights with respect to the Privacy Act and authorizes the use lease will serve to exonerate you from any and all liability stemming from the release of information to A-COPA Bail Bonds/COPA Bail B	actier/ Name;						
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