

Merino Bail Bonds

Indemnitor Application

PERSONAL INFORMATION

Full Name _____
 First Middle Last

Home Address _____ Apt# _____

City _____ State _____ Zip Code _____ Years at this Address _____

() Own () Rent Market Value _____ Mortgage Balance _____

Name of Mortgage Company/Apartment Complex/Landlord _____

Home Phone _____ Cell Phone _____ Work Phone _____

Date of Birth _____ Place of Birth _____ Social Security # _____

Driver License # _____ State _____ Expiration Date _____

Alias/Nickname _____ Maiden Name _____

Race _____ Gender _____ E-Mail _____

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars () Yes () No If yes, where _____ Piercings() Yes () No If yes, where _____

Tattoos () Yes () No If yes, where _____ Description _____

Corrective Lenses () Yes () No If yes, () Contacts () Glasses

EMPLOYMENT HISTORY

Current Employer _____ Supervisor's Name _____

Address _____

Phone _____ Job Title _____ City _____ State _____ Zip Code _____
How Long _____ Shift _____

Former/ Second Employer _____ Supervisor's Name _____

Address _____

Phone _____ Job Title _____ City _____ State _____ Zip Code _____
How Long _____ Shift _____

AUTO INFORMATION

Vehicle 1

Make _____ Model _____ Year _____ Color _____

() Own () Buying Do you have title () Yes () No If No, Financing Company _____

License Plate # _____ State _____ VIN# _____

Insurance Agent/Company _____ Policy # _____ Phone # _____

Vehicle 2

Make _____ Model _____ Year _____ Color _____

() Own () Buying Do you have title () Yes () No If No, Financing Company _____

License Plate # _____ State _____ VIN# _____

SPOUSE INFORMATION

Marital Status () Married () Single () Divorced () Widowed

Spouse's Name _____ Length of Marriage _____
 First Middle Last

Current Address (If different) _____

Cell Phone _____ Work Phone _____

Where were you married _____
 City State County

Date of Birth _____ Place of Birth _____ Social Security # _____

Driver License # _____ State _____ Expiration Date _____

Spouse's Employer _____ Supervisor's Name _____

Work Address _____
 City State Zip Code

Job Title _____ How Long _____ Shift _____

