

**State of New Hampshire
Bureau of Securities Regulation**

PROFESSIONAL BONDSMEN APPLICATION

1. FULL NAME, HOME ADDRESS AND BUSINESS OF THE APPLICANT:

D/O/B ___/___/___ SOCIAL SECURITY # _____ DRIVER'S LICENSE # _____

2. NAME OF EMPLOYERS AND ADDRESS:

3. PERSONAL FINANCIAL STATEMENT OF THE APPLICANT:

ANNUAL AND MONTHLY INCOME:

\$ _____ / \$ _____ PER YEAR APPLICANT

\$ _____ / \$ _____ PER YEAR APPLICANT'S SPOUSE

OTHER ASSETS:

MONTHLY EXPENDITURES:

4. PASSPORT PHOTO _____ ATTACHED.

5. APPLICANT'S THUMBPRINTS _____ ATTACHED.

6. DESCRIPTION OF ALL ARRESTS AND CONVICTIONS OF THE APPLICANT WHICH HAVE NOT BEEN ANNULLED BY A COURT OF LAW:

7. DESCRIPTION OF ANY LICENSE ISSUED OR DENIED TO THE APPLICANT BY THE NEW HAMPSHIRE INSURANCE DEPARTMENT:

8. DESCRIPTION OF ANY LICENSES ISSUED OR DENIED TO THE APPLICANT RELATIVE TO THE BAILBOND BUSINESS BY ANY GOVERNMENT AGENCY:

9. DESCRIPTION OF APPLICANT'S EXPERIENCE IN LAW ENFORCEMENT OR LAW ENFORCEMENT RELATED OCCUPATION:

10. A GENERAL POWER OF ATTORNEY FROM A SURETY COMPANY WILL BE PROVIDED BY:

11. A FIDELITY BOND WILL BE PROVIDED BY:

12. IF THE APPLICANT IS NOT A RESIDENT OF NEW HAMPSHIRE, THE *SECRETARY OF STATE* HAS BEEN APPOINTED AS "AGENT" FOR SERVICE OF PROCESS.

THE APPLICANT SHALL BE SUBSCRIBED WITH THE SWORN STATEMENT THAT THE INFORMATION CONTAINED HEREIN IS TRUE.

_____ APPLICANT

_____ DATE

SIGNED AND SWORN BEFORE ME TO BE TRUE _____

MY COMMISSION EXPIRES _____