

Department of Emergency Service and Public Protection
Division of State Police

License No.: _____
(State Police Use Only)

RENEWAL APPLICATION FOR LICENSE AS PROFESSIONAL BONDSMAN

INDIVIDUAL LICENSE

PARTNERSHIP LICENSE

Name: _____

Date of Birth: _____

Place of Birth: _____

Social Security No.: _____

Home Address: _____

Bondsman Business Name: _____

Business Address: _____

Home Phone No.: _____ Business Phone No.: _____

Occupation (other than Bondsman): _____

Address: _____

Phone No.: _____

Has the applicant ever been charged with or convicted of a crime?

YES NO

<u>Date</u>	<u>Place</u>	<u>Charge</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is the applicant engaged in law enforcement or vested with police powers?

YES NO

Is the applicant a resident of the State of Connecticut?

YES NO

PARTNERSHIP INFORMATION

<u>Name</u>	<u>Professional Bondsman License Number</u>	<u>Exp. Date</u>	<u>Bail Limit</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Co- Applicant 's signature makes partner equally responsible for all bonds posted by applicant.

Co Applicant's Signature

The applicant herewith swears that he/she is a legal and equitable owner of all property stated on the attached financial statement.

STATE OF CONNECTICUT

(Applicant's Signature)

COUNTY OF _____

Dated of Oath: _____ 20 _____

Personally Appeared: _____

Address: _____

Signer of the foregoing application and the attached financial statement and made oath to the truth of the matter therein contained, before me.

Notary Public, Justice of Peace
Commissioner of Superior Court

My commission expires on:
