



Minuteman™ Bail Bonds

1852 W. 11th St. – Suite 306
Tracy, CA 95376
(888) 501-2245 Toll-Free
(209) 836-6060 Main Office
(209) 836-2060 Fax

Official Use Only:

Defendant: _____

Bond(s): _____

CERTIFICATE OF 8% PREMIUM* – (*Certain Conditions and Underwriting Guidelines Apply)

Please check the appropriate box, complete the information and attach any required documents.

Currently Represented by an Attorney

The law office(s) of _____

located at _____

reachable by phone at _____, has been retained to represent defendant

Defendant's Name

Attorney's Name

Currently An Active Member of a Union

I _____, declare:

I am a member of _____ union. Union number: _____.

Union Member's Signature

Union Member's Printed Name

Please return this document along with a copy of either your Union card or a pay stub showing payments made to a union.

Currently An Active Member -OR- Veteran (Hon. Discharge) of the United States Military

I _____, declare: I am an active member - OR - Veteran of the

following branch of the United States armed services: Army ___ Navy ___ Air Force ___ Marines ___ Nat. Guard ___

Military Member's Signature

Military Member's Printed Name

Service Number

Please return this document along with a copy of your Military I.D. card – OR – Hon. Discharge Papers – **Reserves do qualify.**

Minuteman Bail Bonds has been appointed by a surety company that has an 8% rate filed with the California Department of Insurance for Defendants with legal representation retained prior to the time of bail bond posting OR Defendants and/or Indemnitors who are active members of a union OR an active service member (or Honorably Discharged Veteran) of the U.S. military. Proper evidence must be provided so that Minuteman Bail Bonds is able to meet the requirements of State law. Please assist us in protecting this premium adjustment by completing the information above, sign below, and return everything to us at your earliest convenience.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand that Minuteman Bail Bonds is relying on the truthfulness of this declaration and I agree to indemnify Minuteman Bail Bonds for any claims arising out of its reliance on this declaration. **If it is later determined that the above is NOT true and correct, Minuteman Bail Bonds shall notify Declarant that the bail bond premium rate has been increased to 10%. If this occurs, Declarant further agrees to immediately pay the additional premium between 8% and 10%.**

Executed this _____ day of _____, 20_____.

Defendant's / Indemnitor's Signature

Defendant's / Indemnitor's Printed Name

When completed, please submit this document, along with all required supporting documents and materials in person, by mail, or by fax at (209) 836-2060.