

NAME: \_\_\_\_\_

# GRAVES BAIL BONDS

809 East Sabine

Carthage, Texas 75633

PHONE 903-693-4841/903-754-2774

FAX 903-693-8252

gravestire@sbcglobal.net

Date: \_\_\_\_\_

Jail: \_\_\_\_\_

\_\_\_\_\_  
(Full name of Client)

\_\_\_\_\_  
(Full name of Co-Signer & Relationship)

\_\_\_\_\_  
(Full Address)

\_\_\_\_\_  
(Full Address)

\_\_\_\_\_  
(City, St, Zip)

\_\_\_\_\_  
(City, St., Zip)

\_\_\_\_\_  
(Home phone, Mobile phone)

\_\_\_\_\_  
(Home phone, Mobile phone)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Email Address)

**COSIGNER AGREES TO MAKE PAYMENTS IF CLIENTS FAILS: Yes \_\_\_ No \_\_\_**  
**COSIGNER AGREES TO HELP LOCATE CLIENT TO PREVENT BOND FORFEITURE: Yes \_\_\_ No \_\_\_**

## CLIENT INFORMATION

Name you go by: \_\_\_\_\_ DOB: \_\_\_\_\_ DL#: \_\_\_\_\_

SS#: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Hgt: \_\_\_\_\_ Wgt: \_\_\_\_\_

Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ Marks/tat's? : \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ City, St: \_\_\_\_\_

Phone: \_\_\_\_\_ # of yr's/mo's: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Single: \_\_\_\_\_ Married: \_\_\_\_\_ Separated: \_\_\_\_\_ Divorced: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

Ever been bonded before: \_\_\_\_\_ Ever Missed Court: \_\_\_\_\_ Any MTR's \_\_\_\_\_

Auto Yr: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ License: \_\_\_\_\_

## CO-SIGNER INFORMATION

Employer: \_\_\_\_\_ City, St: \_\_\_\_\_ Phone: \_\_\_\_\_

DL#: \_\_\_\_\_ SS#: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship to Client \_\_\_\_\_

## REFERENCES (these must be family members, and each one must be completed in full)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

\*\*\*\*\*

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

NAME: \_\_\_\_\_

**GRAVES BAIL BONDS**

**REFERENCES (these are to be friends, each one must be completed in full)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ City, St: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ City, St: \_\_\_\_\_ Phone: \_\_\_\_\_

\*\*\*\*\*

**In consideration for posting a Bail Bond(s) through Graves Bail Bonds, I agree to the following:**

1. Your total bond fee is: \$ \_\_\_\_\_. Your balance is \$ \_\_\_\_\_, and must be paid **regardless** of the disposition of the case.
2. **You must check in EVERY MONDAY.** If you call, please use the check in number that was given to you when you were bonded.
3. You must continue to check in every Monday until your case(s) have been **COMPLETELY DISPOSED OF.**
4. Failure to check in on Mondays will cause your bond to be **REVOKED**, and a warrant issued for your arrest.
3. If you leave the county where you now reside for 48 hours or more you will need to notify **GRAVES BAIL BONDS.**
4. Notify **GRAVES BAIL BONDS**, within 24 hours of any change of address, phone number or employment.
5. Stay out of jail and do not get any other complaints and/or charges filed against you.
- 6, All monies collected and/or due, are **NON-REFUNDABLE.**
7. You are to make every effort to keep steady employment, and encouraged to retain an attorney.
8. If a warrant is issued for your arrest for any violation arising from this contract, you give **GRAVES BAIL BONDS** and their agent permission to pick you up in any City, County, State, Building or dwelling, in the United States and place you in custody for your return to the county or city jail where the charge(s) are pending.

It is expressly agreed herein that **GRAVES BAIL BONDS** bonded me out of jail. Therefore, **GRAVES BAIL BONDS** is not responsible to my friends, relatives, etc. except where a co-signer has signed on this agreement. Further, I agree herein to be totally responsible for their actions and any expenses that may result from same including telephone call, etc. me, and I thoroughly understand the terms, outlined therein. Further, I agree that this shall be considered a Contract For Services between **GRAVES BAIL BONDS**, and me and the dollar amounts stated for Services rendered shall be a legal debt and the collection thereof enforceable by law, Further, it has been thoroughly explained to me. Additionally, I fully understand that all payments must be **PAID IN FULL** as stated on page 2 #1.

It is understood that all contracts entered into this agreement; **CONTRACT FOR SERVICES, INDEMNITY AGREEMENT, CONDITIONAL DEMAND PROMISSORY NOTE and PROMISSORY NOTE**, have been fully explained to me and I understand its contents. I have read these agreements.

**(If you would like a copy please let the agent know)..**

**I further understand that a violation of any kind, of any part of this and/or other contracts entered into with GRAVES BAIL BONDS is grounds for revocation of my bail bond(s).**

Contract for Services Rendered with **GRAVES BAIL BONDS** Page 2 of 3 referred to as the **“PRINCIPAL, INDEMNITOR”** surety hereinabove referred to as the **“INDEMNITEE”**, and in consideration of the mutual covenants herein contained, I, We, as the case may be, the undersigned Indemnitor(s) agree to pay to the Surety the sum of (\$ \_\_\_\_\_ -) \_\_\_\_\_

NAME: \_\_\_\_\_

**GRAVES BAIL BONDS  
INDEMNITY AGREEMENT**

For and in Consideration of release from jail of: \_\_\_\_\_ herein dollars within five (5) days of a bond forfeiture or writ forfeiture proximately resulting from the Principal's failure to appear in the following described criminal proceedings.

|         |       |          |       |         |       |
|---------|-------|----------|-------|---------|-------|
| Case #: | _____ | Offense: | _____ | Bd Amt. | _____ |
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| Case #: | _____ | Offense: | _____ | Bd Amt. | _____ |
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| Case #: | _____ | Offense: | _____ | Bd Amt. | _____ |
| Case #: | _____ | Offense: | _____ | Bd Amt. | _____ |

1. To pay to Surety a minimum fee equal to & 75.00 per hour expended by Surety, his/her employees and agents, plus all reasonable expenditures incurred in connection therewith if any in an attempt to locate, find, attach, arrest, or surrender the Principal from a result of a bond are writ forfeiture, to include lock up fees, court costs extradition fees and interest.
2. To pay to Surety as a finance charge the maximum lawful interest rate upon all balances which become due hereunder.
3. To pay to Surety reasonable attorney fees and court costs which Surety may incur to enforce the instant Indemnity Agreement.
4. That venue for any action which may be brought hereunder shall lie in the county wherein Surety maintains its office.
5. That the laws of the State of Texas shall exclusively apply to all issues in controversy between Surety and Indemnitor(s).

**FOR THE PURPOSE OF THE INDEMNITY AGREEMENT, THE FOLLOWING DEFINITIONS SHALL GOVERN AND APPLY;**

1. A bond forfeiture occurs when it appears to the judge of the court in which Principal's case(s) is docketed that Principal did not appear in court as directed, and the judge so noted as an entry upon the court's docket.
2. A writ forfeiture occurs when the Principal requires an Attorney to secure a writ to obtain Principal's release from jail and Principal does not appear at the Sheriff's office as directed to post the required Appearance Bond.

**CONDITIONS IN CONSIDERATION OF POSTING BAIL BOND(S)**

**Initial beside each condition.**

1. I WILL BE IN COURT WHEN SCHEDULED \_\_\_\_\_
2. I WILL CALL IN EVERY MONDAY BETWEEN 8 & 12 NOON \_\_\_\_\_
3. I WILL MAKE PAYMENTS AS AGREED \_\_\_\_\_