

DESIGNATION OR DELETION OF PRIMARY BAIL BOND AGENT FOR BAIL BOND AGENCY AND FILING OF BUSINESS NAME

This form must be filed with the Department of Insurance within 10 days of agency inception or change of primary bail bond agent designation, pursuant to 648.387, Florida Statutes.

1. AGENCY INFORMATION

Bail Bond Agency business name, business street address and telephone number:				
Business Name		() -		
Business Street Address		City	State	Zip Code
		Business Telephone Number		

2. PRIMARY BAIL BOND AGENT DESIGNATION / DELETION

To be completed by bail bond agents only (See instructions on back.) License number and full name of the individual who is the designated PRIMARY BAIL BOND AGENT for the bail bond agency location given in Section I *				
License Number	Last Name	Jr., Sr., etc.	First Name	M. I.
Primary Agent: <input type="checkbox"/> Designate <input type="checkbox"/> Delete				

3. OWNER INFORMATION (If more than one owner, attach additional page if needed.)

Owner's license number, full name and residence and business addresses:				
License Number	Last Name	Jr., Sr., etc.	First Name	M. I.
Owner's Business Street Address		City	State	Zip Code
		Residence Telephone Number		
Owner's Residence Street Address		City	State	Zip Code
		Business Telephone Number		

4. ADDITIONAL BUSINESS LOCATIONS

Are there additional locations operating under the same business name given in section I? <input type="checkbox"/> Yes <input type="checkbox"/> No.				
If Yes, list the complete address for each of the additional locations (Attach additional page if needed.)				
Business Street Address		City	State	Zip Code
Business Street Address		City	State	Zip Code

5. OTHER BAIL BOND AGENTS ASSOCIATED WITH AGENCY

Are there additional bail bond agents affiliated with this agency? <input type="checkbox"/> Yes <input type="checkbox"/> No.				
If Yes, list the name, address and license number of the bail bond agents that are associated with of involved in transacting bail bond business for the agency listed in section 1. (Attach additional page if needed.)				
Last Name	First Name	M. I.		
Business Street Address		City	State	Zip Code

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6. SIGNATURE

I understand that, if there is a change in the above information, I must complete a new form and file it with the Department of Insurance within ten (10) days.	
Print name of Owner or Operator of Agency	License I.D. Number
Signature of Owner or Operator of Agency	Date / /
Print name of Primary Bail Bond Agent	License I.D. Number
Signature of Primary Bail Bond Agent	Date / /

SPECIAL NOTE TO THE DESIGNATED PRIMARY BAIL BOND AGENT:

When an updated form is filed designating another primary bail bond agent, the previous designee will no longer be considered the current primary bail bond agent for that designated location. If you should leave the agency you will still be considered the primary bail bond agent until a new form is filed by that agency. If you will no longer be working at the agency location as the designated primary bail bond agent, you are advised to submit this form with item numbers one, two and three completed and the appropriate delete box checked and your signature in the space provided. Failure to remove yourself as the primary bail bond agent may result in you continuing to be held responsible for the activities of the agency until a new designation is made.

FAILURE TO FILE:

A bail bond agency location may not conduct the business of bail bonds unless a primary bail bond agent is designated at all times. Failure to designate a primary bail bond agent within ten (10) days after agency inception or when there is a change in the primary bail bond agent designation as required by Florida Statutes is grounds for disciplinary action pursuant to section 648.45, Florida Statutes.

INSTRUCTIONS FOR COMPLETING PRIMARY BAIL BOND AGENT FORM

To be completed by each person operating a bail bond agency, and for each location of a multiple agency. (See definitions of bail bond agency below.)

Each location of a bail bond agency shall file the name and agency address of the primary bail bond agent. The primary bail bond agent may be the same person listed in section 3.

One form is required for each designation or deletion. The same form **CANNOT** be used for both. The signature of the Primary Bail Bond Agent is required for each agency location in order for the designation or deletion to be valid.

DEFINITIONS:

Bail bond agency is a building, where a licensee maintains an office and where all records required by sections 648.34 and 648.36 are maintained; or an entity that charges a fee or premium to release an accused defendant or detainee from jail; or engages in or employs others to engage in any activity that may be performed only by a licensed and appointed bail bond agent.

Primary bail bond agent is a licensed bail bond agent who is responsible for the overall operation and management of a bail bond agency location and whose responsibilities include hiring and supervising all individuals within that location. Note: A bail bond agent may be designated as primary bail bond agent for only one bail bond agency location.

Ownership requirements: A person may not own, control, or otherwise have a pecuniary interest in a bail bond agency unless such individual is a licensed and appointed bail bond agent.

Please Return This Form To:
Bureau of Agent & Agency Investigation
Bail Bond Unit
200 East Gaines Street
Tallahassee, Florida 32399-0320