



**CLASSIC BAIL BONDS**  
 2121 W. Imperial Hwy. Suite E114  
 (562) 947-1112 (877) 610-2245

Lic# 1843662  
 La Habra, CA 90631  
 Fax (562) 309-8016

Lexington National Insurance Corp.  
 200 E. Lexington St. #501  
 Baltimore, MD 21202

**APPLICATION for INDEMNITOR (person guaranteeing bail)**

Arrestee's Name \_\_\_\_\_ Relationship to Indemnitor \_\_\_\_\_

Indemnitor's Name \_\_\_\_\_ Best Phone Number to Contact \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cellular \_\_\_\_\_ Fax \_\_\_\_\_ Work \_\_\_\_\_

Indemnitor's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Own/Rent/Lease? \_\_\_\_\_ If Rent/Lease, Landlord \_\_\_\_\_ Phone \_\_\_\_\_

If less than 5 years, Previous Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # and State \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Employer's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Monthly Income \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

How Long with Employer? \_\_\_\_\_ Union \_\_\_\_\_ Local# \_\_\_\_\_

Information About Spouse/Significant Other of Indemnitor:

Marital Status \_\_\_\_\_ Name of Spouse/Significant Other \_\_\_\_\_ How Long? \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # and State \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Employer's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Monthly Income \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

How Long with Employer? \_\_\_\_\_ Union \_\_\_\_\_ Local# \_\_\_\_\_

Other Information:

Reference \_\_\_\_\_ Phone \_\_\_\_\_

Reference \_\_\_\_\_ Phone \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Phone \_\_\_\_\_

If Real Property is Required as Security:

Property Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Approximate Property Value \_\_\_\_\_ Year Purchased \_\_\_\_\_ House/Land/Commercial? \_\_\_\_\_

Amounts of All Loans: 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ 4th \_\_\_\_\_

Names of All Persons on Title \_\_\_\_\_

I certify that the above information is true, correct, and complete. I understand that this is an application for a type of credit, and authorize review of my credit history via a credit reporting agency. I authorize the review and confirmation of all information I provide in connection with this application. If I provide credit card information, I authorize charges to be made to the card(s) in relation to this application for bail. I authorize any party or agency to furnish to Lexington National Insurance Corporation, Classic Bail Bonds, or their agents, any and all private or public information and records in their possession concerning me, and direct that a copy of this document shall serve as evidence of said authorization. I agree to indemnify and hold harmless Lexington National Insurance Corporation, Classic Bail Bonds, and their agents, for any and all losses incurred as a result of a forfeiture of any amount of bail.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_