

**MINNESOTA JUDICIAL BRANCH
STATE COURT ADMINISTRATOR'S OFFICE (SCAO)
BAIL BOND AGENT APPLICATION**

Introduction

This form should be used in the following circumstances:

- Applicant has not previously approved to conduct bail bond work in Minnesota District Courts; or
- Applicant has been previously on the Statewide List of Approved Bail Bond Agents (Approved List) but has been inactive for more than six months.

In compliance with Rule 702 of the Minnesota General Rules of Practice for District Courts, prior to procuring bail bonds in the State of Minnesota, agents must complete an application and approval process. Please read and follow the instructions carefully.

Part I – Agent Information and Certification

The agent must complete, sign and date Part I of the application. Make sure your signature is fully notarized before submitting the application. You may not notarize your own signature.

NOTE: Your home address and contact information will be accessible to judges and court personnel only. This information is not accessible on the public web site.

Agent: By signing this application you are acknowledging that you have read and understand the Bail Bond Program Notices (see www.mncourts.gov) and that you will comply with the requirements contained in the Notices in the event SCAO approves your application. Failure to comply with the requirements in the Notices may result in the denial of approval or the revocation of your approval at a later date.

Required Attachments (originals unless otherwise noted)

- Copy of applicant's driver's license or Minnesota ID card.
- Qualified Power of Attorney from each Surety Agency – personal POA only, not a blank sample from the surety company;
- Current passport-quality photograph of applicant

Part II – Bonding Agency Information and Certification

The Bonding Agency that employs the agent must complete and notarize Part II of the application. Part II must be signed and dated by an Authorized Bonding Agency Contact (see Bonding Agency Application for more information). Only if the agent is a sole proprietor of the Bonding Agency should the applicant also sign Part II.

Bonding Agency: By signing Part II of the application, you acknowledge that the applicant is employed by and is authorized to post bonds on behalf of your agency; that the agent is authorized by the identified surety(ies) to issue bail bonds on its behalf; that you assume full responsibility for the actions of the applicant; and that you have read and understand the Bail Bond Program Notices and will comply with the requirements contained in the Notices.

Part III – Bureau of Criminal Apprehension (BCA) Background Check

Part III of the application requires the applicant to complete the Bureau of Criminal Apprehension (BCA) form and send it directly to the BCA at the address provided. **Do not send**

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this form to SCAO; this will result in the form being returned to you and will delay the approval of your application.

<p>NOTE: Background checks must be sent directly from the BCA to SCAO. Please ensure that a stamped envelope addressed to SCAO is enclosed with Part III.</p>
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Approval of Application

Applications will not be processed until the entire application is complete and all required documentation is received, including the BCA background check. All Surety appointments will be verified via the Sircon website (www.sircon.com) and a missing appointment will delay renewal of approval.

When an application is approved, written notice of approval will be sent to the agent, the Bonding Agency that employs the agent and the Surety Company.

An application may be denied for the following reasons:

- The applicant is not currently authorized by the Minnesota Department of Commerce to provide bail bonds;
- The applicant's surety is not currently authorized to do business in Minnesota by the Minnesota Department of Commerce;
- The applicant, his or her general agents or Surety Company has any outstanding/unpaid bonds in any county, state or federal court in Minnesota; or
- A review of the BCA background check or court records shows that the applicant is currently charged with or convicted of:(1) a felony; (2) a crime involving fraud, misrepresentation, false reporting, or misappropriation or conversion of funds; or (3) any other crimes at the gross misdemeanor or misdemeanor level that call into question the applicant's ability, capacity and fitness required to perform the duties and to discharge the responsibilities of a bail bond agent.

Appeal Rights

In the event that a bail bond agent application is denied by SCAO staff, the applicant may request a review by the State Court Administrator. A written request for review must be filed within thirty (30) days from the date of denial. A review of a denial will be based upon the applicant's written submission(s) unless the applicant requests a hearing.

If the review process results in further denial of the agent's application, the agent may appeal the decision, in writing, to the Review Panel, which is composed of three district court judges.

Send completed original application and required documentation to SCAO at:

Bail Bond Program
State Court Administrator's Office
Court Services Division
25 Rev. Dr. Martin Luther King Jr. Blvd., Suite 105
St. Paul, MN 55155

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**Part I – Applicant
(Please type or print legibly)**

AGENT NAME:

Last

First

Middle

Maiden, Alias or Former Name(s) (if applicable)

Date of Birth (MM/DD/YYYY)

Bail Bond License #

HOME ADDRESS:

Street

Apt. #

City

State

Zip code

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Home Phone

Cell Phone

Email Address

Please answer the following questions by checking the correct response. If the answer to any question is YES, attach a detailed explanation, including when, where and what happened.

1. Have you ever been convicted of a non-traffic misdemeanor (including DUI or DWI offense), gross misdemeanor or felony offense? ___ Yes ___ No

2. Do you currently have charges pending for a non-traffic misdemeanor (including DUI or DWI offense), gross misdemeanor or felony offense? ___ Yes ___ No

3. Are you currently, or have you ever been, a defendant in any lawsuit, arbitration, or other proceeding involving allegations of fraud, misappropriation, conversion, mismanagement of funds or breach of fiduciary duty? ___ Yes ___ No

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APPLICANT CERTIFICATION:

I certify that all of the information submitted in Part I of this application and attachments is true and complete. I acknowledge that I have read a copy of the Bail Bond Program Notices posted on the Minnesota Judicial Branch Bail Bond website and certify that I will comply with the requirements contained in these notices in the event the State Court Administrator's Office approves my bail bond application.

Signature of Applicant

Date (MM/DD/YYYY)

Subscribed and sworn to before me this

____ day of _____, 20____

Notary Stamp

Notary Public

My commission expires:

**Part II - Bonding Agency
(Please type or print legibly)**

BONDING AGENCY INFORMATION:

Agency Name

Bonding Agency Contact

Street

City

State

Zip code

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Phone

Fax

Email address

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SURETY COMPANY INFORMATION (attach additional forms if necessary):

Surety Company Name

Surety Company Contact

Street

City

State

Zip code

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Phone

Fax

Email address

SECOND SURETY COMPANY INFORMATION:

Surety Company Name

Surety Company Contact

Street

City

State

Zip code

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Phone

Fax

Email address

BONDING AGENCY:

Please answer the following question by checking the correct response. If your answer is yes, please attach an explanation.

Does the Bonding Agency or Surety Company have any outstanding or unpaid bonds in any Minnesota District or Federal Court? ___ Yes ___ No

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CERTIFICATION OF BONDING AGENCY

I, _____, hereby certify that the above named applicant is employed by and is authorized to post bonds on behalf of _____. This agent is backed by the above named Surety Company(ies), which is (are) authorized to do business in the State of Minnesota. The Bonding Agency assumes full responsibility for the actions of this agent. It is the responsibility of our Agency to notify the SCAO of any change in this agent's employment or liability status.

Dated this _____ day of _____, 20____.

Signature of Authorized Bonding Agency Contact

Name of Authorized Bonding Agency Contact – print

Title

Subscribed and sworn to before me this
_____ day of _____, 20____.

Notary Stamp

Notary Public
My commission expires:

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PART III – Criminal Background Check Authorization Form

This form **must** be mailed separately to: Bureau of Criminal Apprehension
1430 Maryland Avenue East
St. Paul, MN 55106

Re: Criminal Background Check

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information about me to the Minnesota State Court Administrator's Office for the purpose of obtaining approval as a bail bond agent in the State of Minnesota pursuant to Rule 702 of the Minnesota General Rules of Practice for District Courts.

APPLICANT INFORMATION: (please type or print legibly)

Last Name	First	Middle - full
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Maiden, Alias or Former Names (if applicable)

Date of Birth (MM/DD/YYYY)	Gender (M or F)
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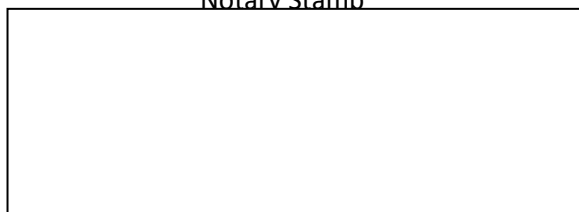
Social Security Number (optional)

This authorization expires one year from the date of my signature.

Signature of Data Subject	Date
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Subscribed and sworn to before me this
____ day of _____, 20____.

Notary Stamp



Notary Public
My commission expires:

Remember to Enclose:

- 1) A personal check, money order, cashier's check, certified or business check, for \$15.00 made payable to the BCA.
- 2) A stamped envelope addressed to the State Court Administrator's office at:
Bail Bond Agent Applications
State Court Administrator's Office
Court Services Division, Suite 105
25 Rev. Dr. Martin Luther King, Jr. Blvd.
St. Paul, MN 55155