



ARKANSAS PROFESSIONAL BAIL BONDSMAN LICENSING BOARD COMPANY STATEMENT

Name of Professional Bail Bond Company \_\_\_\_\_

Bondsman's Name \_\_\_\_\_ (First) (Middle) (Last)

Business Address \_\_\_\_\_ (Street) (City) (State) (Zip)

Residence Address \_\_\_\_\_ (Street) (City) (State) (Zip)

I, \_\_\_\_\_ (Company President/Owner) \_\_\_\_\_ (Title)

do hereby request that \_\_\_\_\_ (Agent) be added to the license of \_\_\_\_\_ (Professional Bail Bond Company) as a professional bail bondsman.

Attached is Power of Attorney # \_\_\_\_\_ authorizing this individual to obligate the bail bond company named herein for an amount not to exceed \$ \_\_\_\_\_ dollars on any one recognizance.

\_\_\_\_\_  
Company President/Owner signature Date

APPLICANT STATEMENT

I, \_\_\_\_\_ (First) (Middle) (Last) hereby make application for a license as a professional bail bondsman through \_\_\_\_\_ (Professional Bail Bond Company)

I hereby certify that I have never been convicted of a felony or anything other than a traffic offense. I hereby certify that all of the above information is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
(Applicant's signature)

STATE OF ARKANSAS )  
 )ss  
COUNTY OF \_\_\_\_\_ )

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)