



PO BOX 33015 ♦ St Petersburg, FL 33733
727 823 4000 ♦ 800 627 0000 ♦ FAX 727 803 4076

AGENT APPLICATION

1) Legal Business Name: _____

Individual's Name: _____

Business Address: _____ , _____
City/State Zip code

Home Address: _____ , _____
City/State Zip code

Social Security #: _____ Tax ID # _____

Business Phone: _____ Home Phone: _____

Fax Number: _____ E-Mail Address: _____

Spouse: YES NO

Spouse's Name: _____ Spouse's Social Security #: _____

2) Is the Business a: CORPORATION ; PARTNERSHIP ; SOLE PROPRIETORSHIP

3) How long in Business under above Name _____

4) List below any Companies or General Agents with whom you have ever done Bail Bond Business and/or been appointed with:

Dates: _____ Company or General Agent: (If applicable, indicate Professional Bondsman)

5) Has any Insurance Company or General Agent or County/Parish/Jurisdiction terminated business with you in the past? YES NO

If YES, when: _____ By Whom: _____

Reason: _____

6) Do you currently have a Build-Up Fund with another Company or General Agent? YES NO

If YES, please advise amount and Company: _____

7) Are you engaged in any other Business or Occupation? YES NO

If YES, Business Name: _____

8) Have you ever been arrested or charged with a crime? YES NO

If YES, where: _____ When: _____

Charge Disposition: _____

9) Have any Judgments, Suits, Tax Liens, or Bankruptcies, been filed against you? Have you had a License Suspended or Revoked? Are you under current Investigation? YES NO

If YES, explain each: _____

10) Has it ever been necessary for payment of Estreatures or Judgments to be paid out of your BUF or by the Company? YES NO

If YES, please explain: _____

11) On a separate page, please provide a brief Resume of your Business Experience and Educational Background. Include the total amount of time spent as a Bail Bondsman, Investigator, Law Enforcement Official or related positions.

12) What amount of liability do you write in one year? _____

How much do you anticipate writing for Bankers? _____

What contract rate are you looking for? _____

13) How did you hear about Bankers Insurance Company? _____

Disclosure to the Consumer

In connection with your application for appointment, Bankers Insurance Group, Inc. and its affiliates ("BIG") intend to conduct an initial and subsequent verification as may be necessary of your background. Please read and sign this form to authorize access to background information.

I, _____, authorize all persons and entities (including but not limited to businesses, corporations, former supervisors, governmental agencies, credit reporting agencies, law enforcement authorities, educational institutions, state insurance departments, the NASD, and all military services) to release all written and verbal information about me to BIG. I release and agree to hold each harmless from all liability and responsibility for doing so.

I authorize BIG to conduct an investigation of my character, general and professional reputation, licensing/ regulatory history, employment history, personal characteristics and agree to hold BIG harmless from all liability and responsibility for doing so.

I understand that the Violent Crime Control and Law Enforcement Act of 1994 (18 U.S.C. section 1033) prohibits BIG from willfully permitting any individual convicted of any criminal felony involving dishonesty or a breach of trust from participating in the business of insurance. I understand that my application for appointment will be rejected if such a conviction is found on my record. I further understand that my application for appointment may be reconsidered if I obtain the specific written consent of the Department of Insurance allowing for my participation in the business of insurance.

Signed: _____

Date: _____

FINANCIAL STATEMENT

Name: _____

Address: _____

Social Security Number: _____ Spouse SS #: _____

To induce BANKERS INSURANCE COMPANY to become bail bond surety for the Undersigned, the following financial statement is submitted, effective _____ day/month/year.

Statement of assets and liabilities of: Individual Partnership Corporation

ASSETS & LIABILITIES

1. CASH (including certificates of deposit, 401K, IRA, etc.)

NAME AND LOCATION OF BANK	TYPE OF ACCOUNT	AMOUNT	IN WHOSE NAME

2. STOCKS, BONDS, ETC.

NAME OF SECURITY	NUMBER OF SHARES	VALUE	IN WHOSE NAME

3. REAL ESTATE

Physical address _____
 Tax assessed value _____ Purchased: Year _____
 Purchase Price _____ Present market value _____
 Current balance of mortgage _____ Rental income _____

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 Tax assessed value _____ Purchased: Year _____
 Purchase Price _____ Present market value _____
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Physical address _____
 Tax assessed value _____ Purchased: Year _____
 Purchase Price _____ Present market value _____
 Current balance of mortgage _____ Rental income _____

4. VEHICLES

MAKE, MODEL, YEAR	TITLED OWNER	CURRENT BALANCE OF LOAN

5. MISCELLANEOUS ASSETS (Equipment, jewelry, coins, receivable, etc.)

DESCRIPTION OF OTHER ASSETS	VALUE	AMOUNT OWED

6. MISCELLANEOUS LIABILITIES

Credit cards, Accounts payable, Notes payable, etc.

BANK	AMOUNT OWED

Student Loans

AMOUNT OWED	MONTHLY PAYMENT

SUMMARY:

ASSETS		LIABILITIES	
Cash	\$		\$
Stocks, Bonds	\$		\$
Real Estate	\$	Due On Real Estate	\$
Vehicles	\$	Due On Vehicles	\$
Miscellaneous Assets	\$	Miscellaneous Liabilities	\$
	\$		\$
	\$		\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$

COMMENTS: _____

The above information is true and correct to the best of my knowledge.

Signature

Date

Spouse's Signature

Date