

Stay Vehicle Forfeiture Bond Application

Required Fields in Red

Personal Information

Full Legal Name: _____

Spouse Name (if any): _____

Date of Infraction: _____ **Is this your first infraction:** _____

If no, provide number of additional infractions and dates?: _____

Any prior bankruptcy, unpaid child support, open judgments or tax liens? _____

If yes, to any of the above, please provide details below:

Street Address: _____

City: _____

State: _____ **Zip Code:** _____

Email Address: _____

Business Phone: _____ **Home Phone:** _____

Cell Phone: _____ **Social Security No.** _____

Vehicle Information

Year: _____ **Make & Model:** _____ **VIN:** _____

Retail Value: \$ _____ **Any encumbrances (Loans against Vehicle?):** _____ **If so, details:**

Lender Name & Address: _____

Account No. _____ **Loan Balance:** \$ _____ **Phone No.** _____

**** Please include copy of purchase agreement and KBB or NADA valuation ****

**** All owners must provide signed Credit Authorization Form ****

Bond Information

Agency Requiring Bond:			
Address:			
City:			
State:		Zip Code:	
Amount of Bond:			
Desired Effective Date:		Expiration Date:	
Court File No:		Court District Number:	
Court State:		County:	
Attorney Name/Firm:			
Attorney Address:			
Attorney City:		Attorney E-mail :	
Attorney State:		Attorney Zip Code:	
Attorney Phone:		Attorney Fax:	

Comments

Please also include copy of citation, civil complaint, Ignition Interlock Release Agreement.

Submit Application

Please return the completed application and signed Credit Authorization Form to:

Nick Newton

nicholas.newton@assuredpartners.com

Jenny Newton

jennifer.newton@assuredpartners.com

Amy Thompson

amy.thompson@assuredpartners.com

Fax: 651-342-1763