



CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR _____
City/County

Located at _____ Case No. _____
Court Address

STATE OF MARYLAND vs. _____
Defendant DOB

**AFFIDAVIT OF BAIL BONDSMAN
(Md. Rule 4-217)**

STATE OF MARYLAND: CITY/COUNTY OF _____

I, the undersigned, respectfully submit that I:

- A. Am duly licensed in the jurisdiction in which the charges are pending, if that jurisdiction licenses bail bondsmen; (Md. Rule 4-217(d)) _____
- B. Am authorized to engage the surety insurers shown on the attached bail bond, as surety on that bail bond, pursuant to a valid general or special power of attorney; (Md. Rule 4-217(d)) _____
- C. Hold a valid license as an insurance broker or agent in this State and the surety insurer is authorized by the Insurance Commissioner of Maryland to write bail bonds in the State; (Md. Rule 4-217(d)) _____
- D. Am appropriately registered as a professional surety with District Court and am not on the current Bail Bond Surety list maintained by the Chief Clerk of the District Court of those in default; _____
- E. Am posting a bail bond that is within any limit specified by general power of attorney or real property equity as shown on the court list or in a special power of attorney filed with the bond; _____
- F. Have disclosed the full fee of \$ _____ for my services and the collateral listed with appropriate disclosure of any agreed upon promissory note or installment contract.

Power #: _____ Indemnitor: _____

Collateral: _____ Address: _____

Promissory Note: _____

Installment Contract: _____

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

Date Signature of Bail Bondsman ID Number

Address

City, State, Zip

**AFFIDAVIT OF DEFENDANT OR INSURER PURSUANT TO
INSURANCE ARTICLE §10-309(d)(1)**

I am _____, the defendant/insurer of the bond referred to in this affidavit of _____ bail bondsman. The bail bondsman has agreed to accept payment of the premium charged for the bail bond in installments. The total amount of the premium owed is \$ _____. The amount of the down payment made is \$ _____. The balance owed to the bail bondsman or the bail bondsman's insurer is \$ _____ and is to be paid in _____ installments of \$ _____ on _____.

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

Date Signature of Defendant/Insurer