

ALABAMA PROFESSIONAL BAIL BONDING BOARD BUSINESS LICENSING APPLICATION 2777 Zelda Road Montgomery AL 36106

Application For Professional Bail Company / Professional Surety Company

NOTE: Only one application is required for businesses with multiple locations. If more than 3 locations, please submit in writing directly to Board Office.

Company Name:				
Mailing Address:				
	(Address)		(City)	
(County)		(State)		(Zip)
Physical Address:				
	(Address)		(City)	
(County)		(State)		(Zip)
Physical Address:				
	(Address)		(City)	
(County)		(State)		(Zip)
Physical Address:				
	(Address)		(City)	
(County)		(State)		(Zip)
Business Phone:				
Company License Numbe	er if this is a Renew	val:		
Business Email:				
Business Owner(s) and Lid	cense Number(s)			
	said application for l plication form; that	business licenses on bel I have personally compl	nalf of said business; that eted this form; that the	nt, do solemnly swear or affirm It I understand the instructions and information given in this
		_ Signature of Applica	nt	
		_ Printed Name of Ap	plicant	
		_ Date		