



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

Application For: Professional Bondsman  Professional Surety Bondsman  Recovery Agent  Agency Employee

Full Name: \_\_\_\_\_  
 (First) (Middle) (Last) (Social Security Number)

Residential Address: \_\_\_\_\_  
 (Street Address) (City)  
 \_\_\_\_\_  
 (County) (State) (Zip)

Business Name and Address: \_\_\_\_\_  
 (Name) (Street Address)  
 \_\_\_\_\_  
 (City) (County) (State) (Zip)

List all Counties you are authorized to execute bonds: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

List other names you have gone by: \_\_\_\_\_

Have you ever been convicted (including a nolo contendere plea or guilty plea) of a felony (or criminal offense) in any state or in federal court (other than minor traffic violations) whether or not sentence was imposed or suspended? **If YES, in addition to an affidavit**, attach a certified copy of the court records regarding your conviction, the nature of the offense date of discharge, if applicable, as well as a statement from the probation or parole officer. YES  NO

**Applicants must complete an online background check from the company contracted with the Board and must not be more than 90 days old. The link to this application will be emailed once the application has been loaded. Payment for the background is due when the background application is entered. Current price is \$40 with a \$2 processing fee.**

List Residence(s) for the past five years, beginning with most recent: (Attach additional page if necessary)

Date From / To	Street Address	City	State

List employment for the past five years, beginning with current employment: (Attach additional page if necessary)

Date From / To	Company Name, Street Address	City	State

Current employer phone number: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Have you been licensed as a bail bondsman in this or any other State? YES  NO

If yes, list State(s): \_\_\_\_\_ license number(s): \_\_\_\_\_

Has your bail bonding license or authorization to write bail ever been suspended or revoked in this State or any other?

If yes, please provide information and documentation as to cause and findings. YES  NO

Year last licensed: \_\_\_\_\_ (Attach additional page if necessary)

Are you a U.S. Citizen? YES  NO

Certifying Statement "By virtue of filing this application, I do solemnly swear or affirm that I am of good moral character, and that I understand the instructions and terms as set forth in this application form, that I have personally completed this form, that the information given in this application is true, correct, and complete to the best of my knowledge. I hereby authorize the Alabama Professional Bail Bonding Board to verify any and all information contained in this application, including information maintained in applicable data banks, and to transmit this information to the licensing authority of the state to which this application is made. I authorize the licensing authority of the state where application is submitted to review state files pertaining to my licensure, and all law enforcement records, administrative records, motor vehicle records, and court documents to confirm the accuracy and completeness of the information provided herein. This application and signature shall act as authorization of entities in possession of applicable information to release such information to the licensing authority.

\_\_\_\_\_ Signature of Applicant

\_\_\_\_\_ Printed Name of Applicant

\_\_\_\_\_ Date

Mail signed application with the fees (\$125.00 – application fee and \$10.00 – ID Card fee paid by money order, cashier’s check or business check) totaling \$135.00 along with Immigrations Compliance Form, a copy of your driver’s license and the 2x2 photo to:

ALABAMA PROFESSIONAL BAIL BONDING BOARD  
2777 ZELDA ROAD  
MONTGOMERY AL 36106