

CIVIL BOND APPLICATION

INSTRUCTIONS

Option 1 — Email or Fax

Complete both pages of the application.

* If this is a court ordered bond, include a copy of the court order and/or judgement for the bond.

✉ Email completed application to:
civilapp@bondservices.com

— OR —

📠 Fax to:
213-403-4352

Option 2 — Online

Apply for your civil bond online at:

🖥 www.bondservices.com/civil-bond-application

Civil Bonds Include

- Writ of Attachment Bonds
- Receivers
- Injunctions
- Temporary Protective Orders
- Temporary Restraining Orders
- Release of Mechanics Liens
- And More

NEED HELP?

Call us between the hours of 9am–4pm PST

San Diego

Phone: (619) 231-9522
Fax: (619) 231-9545
sandiego@bondservices.com

Orange County

Phone: (888) 558-3007
Fax: (877) 558-8297
orangecounty@bondservices.com

Los Angeles

Phone: (213) 628-2970
Fax: (213) 628-2977
losangeles@bondservices.com

Inland Empire

Phone: (909) 890-1409
Fax: (909) 890-4282
sanbernardino@bondservices.com

San Jose

Phone: (408) 998-5056
Fax: (408) 279-3160
sanjose@bondservices.com

Bay Area / Concord

Phone: (925) 370-2330
Fax: (925) 370-2339
norcal@bondservices.com

Sacramento

Phone: (916) 424-0435
Fax: (916) 424-0437
sacramento@bondservices.com

Texas

Phone: (817) 509-1511
Fax: (817) 796-2637
info@southwestbonding.com

Arizona

Phone: (623) 362-0601
Fax: (623) 362-2218
az@bondservices.com



CIVIL COURT BOND APPLICATION

Email completed application to civilapp@bondservices.com. Or Fax to 213-403-4352.

Type of Bond/Undertaking _____ Amount _____

Hearing Date _____ Case No _____

Name of Court _____ Code Section _____

*** If this is a court ordered bond, include a copy of the court order and/or judgment for the bond.**

Copies of other court documents as well as financial statements may be required.

Attorney Info

Attorney Representing Principal _____ SBN _____

Law Firm _____

Phone Number _____ Email Address _____

Address _____

City _____ State _____ Zip Code _____

Principal Info

Name _____

Phone Number _____ Email Address _____

Address _____

City _____ State _____ Zip Code _____

Complete this section if the Principal is an Individual

Social Security Number _____ Drivers License # _____ State _____

Your Net Worth _____ Date of Birth _____

Employer _____ Position (If retired, previous position) _____

If Self Employed, Nature of Business _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Length of Employment/Ownership _____

Do you own a home? _____ Do you rent? _____ Other (explain) _____

Complete this section if the Principal is a Legal Entity

Nature of Business _____ Tax ID Number _____

Names of all Business Owners, Residence Addresses and Social Security Numbers:

(Business Owner Name)	(Residence Address)	(Social Security Number)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

INDEMNITY AGREEMENT – READ CAREFULLY. Your signature creates legal consequences to you.

(This field for Bond Services admin only.)

In consideration of _____ referred to hereafter as “Surety” issuing the bond applied for, the undersigned hereby agree for themselves, their heirs, successors and assigns, jointly and severally:

1. To pay Surety an annual premium in advance each year during which liability under the bond shall continue in force and until satisfactory evidence of termination of the Surety’s liability is furnished to the Surety.
2. To indemnify Surety against all losses, liabilities, costs, damages, attorneys’ fees and expenses the Surety may incur or has incurred due to the execution and issuance of the bond on, before or after this date including any modifications, renewals or extensions of the bond or the enforcement of the terms of this indemnity agreement.
3. The Surety or its representatives shall have the right to examine the credit history, department of motor vehicle records, employment history, books and records of the undersigned or the assets covered by the bond, or the assets pledged as collateral for the bond. Privacy Notice: All non-public personal information gathered pursuant to the application shall not be disclosed except as permitted by law.
4. The undersigned agree to waive notice of the execution of the bond, notice of any fact, knowledge or information affecting the undersigned’s rights or liabilities under the bond that Surety may have or discover prior to or after execution of the bond.
5. The undersigned, upon written demand, shall deposit with Surety a sum of money requested by Surety to cover any claim, suit, expense or judgment that Surety may in its absolute discretion determine is necessary and the deposit shall be pledged as collateral security on any such bond or other bonds the Surety may have issued for the undersigned. The undersigned hereby irrevocably appoints Surety as their attorney in fact to execute any documents necessary to perfect Surety’s security interests in any collateral submitted to Surety. Surety shall have the exclusive right to determine if any claim or suit shall be denied, paid, compromised, defended or appealed. An itemized statement of payments made by Surety shall be prima facie evidence of the obligation of undersigned due to Surety. The undersigned agree that it is their responsibility to defend their own interests.
6. Surety and undersigned agree that the place of performance of this agreement, including the promise to pay Surety, shall be in Los Angeles County, California, and venue for any suit, arbitration, mediation or any other form of dispute resolution shall be in Los Angeles County, California.
7. The rights and obligations of the undersigned are in addition to and cumulative of all other rights, liabilities and obligations under the laws of the State of California. The undersigned confirms that Surety shall have every right, defense or remedy including the rights of exoneration and subrogation.
8. Unless specified by law or stated in the bond that the bond cannot be cancelled, Surety may cancel bond by mailing a notice of cancellation in the U.S. mail to the Obligee and Principal at the last address provided to Surety and cancellation shall become effective thirty (30) days after the date of deposit with the United States Postal Service.

The Applicant and each Indemnitor agrees that this document and all bonds issued by the Surety will be subject to the terms of the Uniform Electronic Transactions Act (“UETA”), to the extent that the UETA has been adopted by the State Legislature in the relevant jurisdiction, and any and all substantially similar federal or state legislation designed to regulated electronic commerce. Any person who includes false or misleading information in an application for an insurance policy is subject to criminal and civil penalties.

Regardless of the date of signature, this indemnity is effective as of the date of execution and renewal of the aforementioned bond(s) and is continuous until Surety is satisfactorily discharged from liability pursuant to the terms and conditions contained herein and in the bond(s).

First year’s premium is fully earned upon issuance of the bond.

IMPORTANT SIGNATURE INSTRUCTIONS

*If an individual or sole owner, applicant must sign as duly authorized representative. Spouse must sign personal indemnity below.
If a general partnership, managing member must sign as duly authorized representative.
If a corporation, an officer must sign as the authorized representative.*

Signed, sworn to and dated this _____ day of _____, _____.
(Day) (Month) (Year)

Applicant: _____ X _____
(Print entire name exactly as it appears on the bond)

Print Name and Title

Additional Indemnitors (if required):

X _____ X _____

Print Name and Title

Print Name and Title

X _____

X _____

Print Name and Title

Print Name and Title