



2025 APPLICATION FOR BONDSMAN INSTRUCTIONS NOTICE OF REQUIRED DOCUMENTS AND GENERAL INFORMATION

You are ineligible if you have an outstanding criminal judgment against you.

Failure to attach required documents will result in your application being DENIED.

1. Current application (*Last Revision Date 9/4/2024*) completely filled out, including the affidavit, signed and notarized properly.
2. **Incomplete applications, altered application and/or late filed applications will not be considered. Applications cannot be printed on your company letterhead.**
3. Current (**within 90 days**) Qualifying Power of Attorney.
4. Certificate of Authority relative to insurance.
5. Copy of a current ICHAT criminal background (obtained from www.michigan.gov/msp). **A current ICHAT report means one that is not more than 5 days old at the time of submission of signed application to this Court.**
6. Copy of individual license to engage in the business of insurance from the Office of Financial and Insurance Services of the State of Michigan.
7. A valid Driver's License or valid State Identification.
8. **Any outstanding judgments or default judgments against an agency or agent with any Court, must be paid in full in order to be considered for the Wayne County Bail Bond Listing.**

DEADLINE FOR APPLICATION: Friday October

Application must be received via mail or dropped off to:

Third Judicial Circuit of Michigan – Criminal Division
5301 Russell Street
Court Administration Office
Attention: Kathryn Eckel, Detroit, MI 48226

THE THIRD JUDICIAL CIRCUIT OF MICHIGAN

2025 Application for Bondsman

Pursuant to MCL 750.167b

All persons desiring to engage in the business of becoming surety upon bonds for compensation in criminal cases in Wayne County shall apply pursuant to the following:

PLEASE PRINT CLEARLY AND COMPLETE THE ENTIRE APPLICATION. MODIFIED, INCOMPLETE AND/ OR ILLEGIBLE APPLICATIONS WILL BE REJECTED WITHOUT CONSIDERATION BY THE COURT.

1. Applicant's full name, including first, middle and last: _____

2. Applicant's residence address: _____

City _____ State _____ Zip Code _____

3. Home and Cell Number (include area code): Home _____ Cell _____

4. Date of birth (mm/dd/yyyy) _____

5. Email address: _____

6. A valid Driver's License/State ID No. and expiration date: _____

(Attach a clear, legible copy of your Driver's License or state identification to this application.)

7. Is your license currently valid? Yes _____ No _____

8. List the address(es) where you have resided within the past five (5) years:

9. Name of agency under which applicant is applying (complete business name as it appears on your license):

10. Name of agency owner: _____

11. Applicant's business address: _____

City _____ State _____ Zip Code _____

12. Business Phone Number (include Area Code) _____

13. Collect and/or Toll-Free Numbers (include Area Code): _____

14. Agency email address (obtain from agency owner): _____

15. List the business(es) during the past five (5) years for which you have operated as a bondsman. This includes if you were self-employed and the name under which you conducted business:

16. List the name(s) of your current employer(s). This includes the name of your self-employed company if applicable: _____

17. Are there any pending criminal cases against you? If yes, you may be ineligible to be added to our list. Please provide the following information:

Felony

Court Date _____

Case No. _____

Jurisdiction _____

Charge _____

Misdemeanor

Court Date _____

Case No. _____

Jurisdiction _____

Charge _____

Felony

Court Date _____

Case No. _____

Jurisdiction _____

Charge _____

Misdemeanor

Court Date _____

Case No. _____

Jurisdiction _____

Charge _____

Felony

Court Date _____

Case No. _____

Jurisdiction _____

Misdemeanor

Court Date _____

Case No. _____

Jurisdiction _____

Charge _____

Charge _____

18. Are there any pending civil cases against you or the agency you represent? If yes, please provide the following information:

Court Date _____
Case No. _____
Opposing Party _____
Damages Claimed \$ _____
Cause of Action _____
Jurisdiction _____

Court Date _____
Case No. _____
Opposing Party _____
Damages Claimed \$ _____
Cause of Action _____
Jurisdiction _____

Court Date _____
Case No. _____
Opposing Party _____
Damages Claimed \$ _____
Cause of Action _____
Jurisdiction _____

Court Date _____
Case No. _____
Opposing Party _____
Damages Claimed \$ _____
Cause of Action _____
Jurisdiction _____

19. Do you or the agency you represent have any outstanding civil judgments? If yes, please provide the following information:

<u>Court Involved</u>	<u>Case Number</u>	<u>Case Name</u>	<u>Judgment Amt.</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

20. Do you have **any** judgments (outstanding or satisfied) issued against you or the agency(s) you have represented within the past five (5) years on bail bonds you have written in any Court? **Yes** _____ **No** _____

21. If yes, name the court involved, the case name, case number and the amount. Attach a copy of each judgment and, if applicable, a Satisfaction of Judgment. If more space is needed, please attach an additional sheet. List any bonds (2020 through the present) in which you were the surety and the defendant has an outstanding Failure to Appear (FTA) warrant. If more space is needed, please attach an additional sheet.

One (1) or more unpaid outstanding FTA judgment(s) will result in you being removed from the Wayne County list.

<u>Court Involved</u>	<u>Case Number</u>	<u>Case Name</u>	<u>Defendant's Name</u>
_____	_____	_____	_____

22. Do you have any conviction(s) for violation of any criminal statutes or ordinances (non-traffic violations)? Yes _____ No _____

Please attach a copy of your ICHAT criminal background search. The ICHAT printout **must not be more than 5 days old at the time of submission of the signed application** to this Court. Request ICHAT through www.michigan.gov/msp.

23. Name and address of insurance company underwriting bail bonds you sign.

City _____ State _____ Zip Code _____

Minimum coverage required is \$100,000. It is the responsibility of the Bail Bond Agency to notify this Court within 10 days of any change in coverage. Failure to do so will result in the Bail Bond Agency and/or person to be removed from the Third Judicial Circuit of Michigan Approved Surety Bond Company List.

24. Attach a **clear** copy of your current occupational license as an agent. Does your individual licensing with the Department of Insurance and Financial Services have an “active” status? ____ Yes ____ No

Note: Statements number 25 and 26 are to be addressed by the Business Owner only:

25. Please include with your applications a list of all certified agents who will be listed under your company to write bonds in 2025. To delete an agent after the list has been posted, please notify this Court in writing at the following address:

**Third Judicial Circuit of Michigan
Attn: Kathryn Eckel
5301 Russell Street
Detroit, MI 48226-2384**

26. Attach Proof of Insurance for the company, including the maximum amount of coverage.

27. Affidavit:

I, the undersigned applicant, being duly sworn state that all of my statements on this “Application for Bondsman” are true. I will at no time become obligated upon any bond in excess of the coverage of insurance established at the time of approval of my acting as a bondsman. (This includes and applies to bonds written in and outside of Wayne County, or any other jurisdiction.) I shall promptly notify the Chief Judge, in writing, of any change in my insurance status, residence agency address(es) or affiliation.

By applying to be named as an approved surety in Wayne County, Michigan, I agree that I will act as a surety on my own behalf. I further acknowledge that if I am approved to issue surety bonds in Wayne County, Michigan, I will be responsible for any judgments that arise from the surety bonds that I have issued. Finally, I agree to accept service by First Class mail of any notice or other documentation related to the forfeiture of bonds.

_____	_____
Date	Applicant’s Signature
_____	_____
Printed Name of Applicant	Name of Agency

Subscribed and sworn to before me, a notary public in and for the County of _____,
State of _____ this _____ day of _____, 2023.

_____	My Commission Expires: _____
Notary Public Signature	

NOTICE OF REQUIRED DOCUMENTS

Failure to attach a copy of the required documents will result in your application being denied.

1. Current (Last Revision Date 9/04/2024) completely filled out, including the affidavit, signed and notarized properly.
2. Current (within 90 days) Qualifying Power of Attorney.
3. Certificate of Authority relative to insurance.
4. Copy of ICHAT criminal background (obtained from www.michigan.gov/msp) **and not more than 5 days old at time of submission of signed application.**
5. Copy of individual license to engage in the business of insurance from the Office of Financial and Insurance Services of the State of Michigan.
6. A valid Driver's License (not expired).

To be considered for placement on the Wayne County Bail Bondsman List for 2025, all of the above listed documents must be filed with the Third Judicial Circuit of Michigan – Criminal Division, Court Administration Office, Attention: Kathryn Eckel, 5301 Russell Street, Detroit, MI 48226 by close of business, 4:00 pm Friday, October 11, 2024.