

**AMANDA STANFORD**  
**Office of the Clerk of the Superior Court**  
**Pinal County**

PROFESSIONAL BAIL BOND AGENT INFORMATION

ACCEPTING HOURS AND LOCATIONS

- Affidavits for Bail Bondsmen are accepted Monday-Friday from the hours of 8:00 a.m. until 3:30 p.m.
- Affidavits for Bail Bondsmen are submitted in our Florence Office location only at 971 Jason Lopez Circle Bld. A, Florence AZ 85132.
- When Applicant arrives they will submit their documents to window (8).

REQUIREMENTS FOR ISSUANCE OF PROFESSIONAL BAIL BOND AGENT I.D. CARD

- The Applicant is required to submit an original Affidavit, original Power of Attorney along with the Bail Bond Agent Information Sheet.
- If a Power of Attorney has been previously filed for the Applicant with Pinal County Superior Court, a new Power of Attorney is not required. A new Power of Attorney is required if the Applicant is insured with a new company.
- If the Power of Attorney contains multiple applicants an original must be submitted for the Applicant applying.
- The Bail Bond Agent Information Sheet and Affidavit must be completed in full with the Affidavit being notarized prior to submitting to the Superior Court for processing.
- Two (2) passport photos are required. Passport photos may be obtained at any Walgreens, Wal-Mart or Costco locations.
- Bail Bond Agent Affidavits are renewed annually.

REQUIRED FEES

Filing Fee for Affidavit for Bail Bond Agent:	\$28.00
Filing Fee for Power of Attorney (if applicable):	\$28.00
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Total:	\$56.00

- The filing fee may be paid by cash, money order, credit card, Visa/MasterCard, personal check with card holder/check holder's valid ID. Checks and Money Orders are to be made payable to: Clerk of the Superior Court

## PROFESSIONAL BAIL BOND AGENT APPLICANT INSTRUCTIONS

### INTRODUCTION

Rule 7.1(f) Professional Bond Agent. Any person who is surety simultaneously on more than four appearance bonds is a “professional bond agent.” No person may be a professional bond agent unless the person certifies in writing (Affidavit) under oath to the Clerk the of the Superior Court that he or she (1) Is a resident of this state; (2) Has sufficient financial net worth to satisfy reasonable obligations as a surety; (3) Agrees to assume an affirmative duty to the court to remain in regular contact with any defendant released pursuant to an appearance bond on which the person is a surety; (4) Has not been convicted of a felony; (5) Has no judgments arising out of surety undertaking against him or her; (6) Has not, within a period of two years violated any provisions of these rules or any court order.

### APPLICATION

The Applicant must submit an Affidavit under oath to the Pinal County Superior Court to be a certified Professional Bail Bond Agent.

Applicant must submit the following to the Clerk of the Superior Court for certification of Professional Bail Bond Agent:

- Original Affidavit. Affidavit must be completed in full and notarized.
- Bail Bond Agent Information Sheet
- Power of Attorney (if applicable)
- (2) passport Photos
- Payment of fee to the Clerk of the Superior Court

### PROCEDURE FOR CERTIFICATION OF PROFESSIONAL BAIL BOND AGENT

1. Applicant will submit all required documentation to the Clerk of the Superior Court at window (8).
2. Clerk will then verify with the Arizona Department of Insurance Licensing that Applicant's insurance license has been issued. For more information on the Arizona Department of Insurance Licensing please visit: [www.id.state.az.us](http://www.id.state.az.us).
3. Clerk will file and process Affidavit for Bail Bond Agent, Power of Attorney (if applicable) and Bail Bond Agent Information Sheet. Clerk will assign a case number and process filing fees. A receipt will be provided to Applicant.
4. Clerk will then enter all case information in to Superior Court database.
5. Clerk will then prepare the Applicants Bail Bond Agent I.D. Card and collect Applicants signature on card. Applicant will be provided Bail Bond Agent I.D. Card same day.

Name of Person Filing: \_\_\_\_\_  
Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**SUPERIOR COURT OF ARIZONA  
PINAL COUNTY**

CASE NUMBER: **BB** \_\_\_\_\_

**AFFIDAVIT**

I \_\_\_\_\_ DOB: \_\_\_\_\_

d/b/a \_\_\_\_\_

[ATTACH A COPY OF CERTIFICATE OF ASSUMED BUSINESS NAME THAT HAS BEEN DULY FILED PURSUANT TO  
A.R.S. §§ 20-295 (D) & (E), 20-318 (A), (B) & (C)]

or as an agent working for \_\_\_\_\_ (PERSON)

\_\_\_\_\_ (COMPANY)

[NAME OF COMPANY AND PERSON WHO HAS CERTIFICATE OF ASSUMED BUSINESS NAME ON FILE]

Being duly sworn under oath, depose and say that I:

1. Am a resident of this state;
2. Have sufficient financial net worth to satisfy reasonable obligations as a surety;
3. Agree to assume an affirmative duty to the Court to remain in regular contact with any defendant released pursuant to an appearance bond on which I am a surety;
4. Have not been convicted of a felony;
5. Have no judgment arising out of surety undertakings outstanding against me;
6. Have not, within a period of two years, violated any provisions of these rules or any court order;
7. Am currently licensed with the Arizona Department of Insurance # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

State of Arizona )

)

County of \_\_\_\_\_ )

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

by \_\_\_\_\_  
Name of Signer

\_\_\_\_\_  
Commission Expires

\_\_\_\_\_  
Notary Public



**OFFICE OF AMANDA STANFORD**  
PINAL COUNTY  
CLERK OF THE SUPERIOR COURT  
JURY COMMISSIONER

971 JASON LOPEZ CIRCLE BLDG. A  
FLORENCE, ARIZONA 85132  
TELEPHONE (520) 509-3555

P.O. BOX 2730  
FLORENCE, ARIZONA 85132  
FAX (520) 866-5320

**BAIL BOND AGENT INFORMATION SHEET**

**In Order To Process Your Request  
Please Provide Us With The Following Information:**

Name: \_\_\_\_\_  
Last First M.I.

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ D.O.B \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

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

Bond Limitations: \_\_\_\_\_

**To Be Completed By The Court:**

**BB#** \_\_\_\_\_

License Expires: \_\_\_\_\_

License Expiration Date Entered in AJACS: \_\_\_\_\_