

**STATE OF CONNECTICUT INSURANCE DEPARTMENT****Application for Individual
Surety Bail Bond Agent License**

Make check payable to: "Treasurer, State of Connecticut"

Fee: \$250

For Dept Use Only

Date: _____

Filing Fee: _____

License Fee: _____

(Please Print or Type)

1. Soc. Security Number		2. N/A		3. N/A	
4. Last Name Jr./Sr.		5. First Name	6. Middle Name	7. Date of Birth (month) ____ (day) ____ (year) ____	
8. Residence/Home Address (Physical Street)		9. P.O. Box	10. City	11. State	12. Zip
13. Home Phone Number	14. Gender (Circle One) Male / Female	15. Are you a citizen of the United States? (Check One) Yes ____ No ____ (If No, of which country you are a citizen? (If No, you must supply work authorization.)			
16. Business Name/Employer's Name					
17. Business Address (Physical Street)		18. P.O. Box	19. City	20. State	21. Zip
22. Business Phone Number	23. Business Fax Number	24. Business E-mail Address		25. Business Website Site Address	
26. Applicant's Mailing Address		27. P.O. Box	28. City	29. State	30. Zip

BUSINESS ENTITY AFFILIATIONS

31. List your Business Affiliations: (Complete only if the applicant is to be licensed as an active member of the business entity)

Tax ID _____

Name of Firm _____

Tax ID _____

Name of Firm _____

STATUS (CHECK ONE)

32. New License: ____ Reinstatement: ____ (CT License # _____)

BACKGROUND INFORMATION**33. The Applicant must read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature.**

1. Have you ever been convicted of a crime, had a judgment withheld or deferred, or are you currently charged with, committing a crime?

Yes ____ No ____

"Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations or convictions involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you answer yes, you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a copy of the charging document, and
- c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

If you have a felony conviction, have you applied for a waiver as required by 18 USC 1033?

N/A ____ Yes ____ No ____

If so, was that waiver granted? (Attach copy of 1033 waiver approved by home state.)

N/A ____ Yes ____ No ____

2. Have you ever been named or involved as party in an administrative proceeding regarding any professional or occupational license or registration? Yes ____ No ____ "Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. INCLUDE Any business so named because of your actions, in your capacity as an owner, partner, officer, director, or member or manager of a Limited Liability Company. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident,
- b) a copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

3. Has any demand been made or judgment rendered against you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others. Yes ____ No ____

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment, and/or type and location of bankruptcy.

4. Have you been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? Yes ____ No ____

If you answer yes, identify the jurisdiction(s): _____

5. Are you currently a party to, or have you ever been found liable in, any lawsuit, arbitration or mediation proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? Yes ____ No ____

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident,
 b) a copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, or mediation proceedings and
 c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.
6. Have you or any business in which you are or were an owner, partner, officer or director or member or manager of a limited liability company ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? Yes ___ No ___
- If you answer yes, you must attach to this application:
 a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and
 b) copies of all relevant documents.
7. Do you have a child support obligation in arrearage? Yes ___ No ___
- If you answer yes,
 a) by how many months are you in arrearage? ___ Months
 b) are you currently subject to and in compliance with any repayment agreement Yes ___ No ___
 c) are you the subject of a child support related subpoena/warrant? Yes ___ No ___
- (If you answered yes, provide documentation showing proof of current payments or an approved repayment plan from the appropriate state child support agency.)

APPLICANT'S CERTIFICATION AND ATTESTATION

34. The Applicant must read the following very carefully:
1. I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.
 2. I further certify that I grant permission to the Commissioner of Insurance to verify information with any federal, state or local government agency, current or former employer, or insurance company.
 3. I further certify that, under penalty of perjury, either: a) I have no child-support obligation, or b) I have a child-support obligation and I am currently in compliance with that obligation, or c) I have identified my child support obligation arrearage on this application.
 4. I acknowledge that I understand and will comply with the insurance laws and regulations of the State of Connecticut.
 5. I hereby certify that upon request, I will furnish the Connecticut Insurance Department to which I am applying, certified copies of any documents attached to this application or requested by the Connecticut Insurance Department.

Month Day Year

Original Applicant Signature

Full Legal Name (Printed or Typed)

INSTRUCTIONS

- 35.
1. Register for approved pre-licensing course.
 2. Upon successful completion of pre-licensing course, applicant must contact **Prometric at (800) 341-3257** to schedule a bail bond exam.
 3. After receiving a passing grade on the bail bond exam, applicant must submit items A through H to:
CT Insurance Department, Fraud and Investigations Unit, PO Box 816, Hartford, CT 06142-0816
- A. Original completed and signed **Individual Surety Bail Bond Agent License Application**.
 - B. One recent, passport-sized, full-faced photo.
 - C. Copy of Birth Certificate evidencing that you are a citizen and at least 18 years of age; or, if you are a naturalized citizen, a letter from the U.S. Citizenship and Immigration Services (USCIS) office attesting to naturalization, and evidence of age.
 - D. A credit bureau report from one of the three major credit bureaus (Experian, Trans Union, Equifax), dated within ninety days of the application signature date.
 - E. Two (2) letters of character reference signed by the persons providing the reference. The letters are to be sent directly from the authors to the attention of the Ins Dept and must include each author's address and telephone number. Form letters are not acceptable and will be returned. The Ins Dept will not accept letters mailed or hand delivered by the applicant. Letter must be submitted within 30 days of submitting the application.
 - F. Original pre-license course completion certificate.
 - G. Original examination score report showing a passing grade.
 - H. Check payable to "**Treasurer, State of Connecticut**" in the amount of \$250.00 for first time applicant or reinstatement.

After submitting the above documents to the Department, submit a second passport-sized photo, along with a photocopy of the signed application and photocopy of the check, to:

Office of the Chief State's Attorney, Asset Forfeiture Bureau, 300 Corporate Place, Rocky Hill, CT 06067