



COMMONWEALTH OF VIRGINIA
Department of Criminal Justice Services

P.O. Box 1300 • Richmond, VA 23218
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Status Hotline
(804) 786-1132
1-877-9STATUS

Bail Bondsman – PROPERTY COLLATERAL VERIFICATION FORM

Applicant Information

DCJS ID # 99-	Last Name:	First Name:	MI:
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Please Select Appropriate Category(s)

<input type="checkbox"/> Real Estate	<input type="checkbox"/> Cash	<input type="checkbox"/> Certificate of Deposit
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PART I – Cash

- Cash accounts must be held by an FCIC-insured financial institution pursuant §9.1-185 of the *Code of Virginia*.
- Please attach a [Control Agreement Form](#) for each account pledged as collateral. The Control Agreement Form must be signed by the appropriate officer of the issuing/holding financial institution.
- A [Special Power of Attorney](#) must be attached for each account in which the applicant is not the sole owner.

Please list each individual account (If additional space is needed, you may photocopy this form and attach.)

Name(s) on Account:

Name and Address of Financial Institution:

Type of Account:	Account Number:	Account Value:	Amount Pledged:
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Name(s) on Account:

Name and Address of Financial Institution:

Type of Account:	Account Number:	Account Value:	Amount Pledged:
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PART 2 –Certificate of Deposit

- Certificate of Deposit must be issued by an FDIC-insured financial institution pursuant to §9.1-185 of the *Code of Virginia*.
- Please attach a [Control Agreement Form](#) for each account pledged as collateral. The Control Agreement Form must be signed by the appropriate officer of the issuing/holding financial institution
- A [Special Power of Attorney](#) must be attached for each account in which the applicant is not the sole owner.

Please list each individual account (If additional space is needed, you may photocopy this form and attach.)

Name(s) on Account or Payee of Security (as it reads on CD):

Name and Address of Financial Institution:

ID Number of CD:	First Maturity Date:	Amount of Security:	Amount Pledged for Bonding:
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Name(s) on Account or Payee of Security (as it reads on CD):

Name and Address of Financial Institution:

ID Number of CD:	First Maturity Date:	Amount of Security:	Amount Pledged for Bonding:
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PART 3 – Real Estate

- Please attach a [Title Certificate Report](#) for each individual property pledged as collateral. The Title Certificate Report must be completed by an insured title abstractor.
- Please attach a separate Deed of Trust for each property according to the type of ownership.
- A [Special Power of Attorney](#) must be attached for each property in which the applicant is not the sole owner.

Please list each individual property (If additional space is needed, you may photocopy this form and attach.)

Physical Address of Property:

*Value as reflected on appraisal or tax assessment: \$	Total Lien or Obligation: \$	Total Equity Pledged: \$
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Physical Address of Property:

*Value as reflected on appraisal or tax assessment: \$	Total Lien or Obligation: \$	Total Equity Pledged: \$
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Physical Address of Property:

*Value as reflected on appraisal or tax assessment: \$	Total Lien or Obligation: \$	Total Equity Pledged: \$
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Physical Address of Property:

*Value as reflected on appraisal or tax assessment: \$	Total Lien or Obligation: \$	Total Equity Pledged: \$
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Physical Address of Property:

*Value as reflected on appraisal or tax assessment: \$	Total Lien or Obligation: \$	Total Equity Pledged: \$
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Affidavit

_____ (initial) I, the undersigned, certify that all information contained on this application is true and correct to the best of my knowledge and I have not omitted any pertinent information.

_____ (initial) I understand that any misrepresentation, falsification or omission of pertinent information may be cause for denial of my application and may result in civil or criminal penalties.

_____ (initial) I understand that any misrepresentation, falsification or omission of pertinent information may be forwarded to the Commonwealth's Attorney Office for criminal prosecution.

_____ (initial) I understand that any misrepresentation, falsification or omission of pertinent information may result in criminal charges, including but not limited to feloniously forging and uttering a public document in violation of Va. Code § 18.2-168.

_____ (initial) I understand that I am responsible for maintaining full compliance with the Virginia Code and applicable regulations relating to Surety and Property Bail Bondsmen and Bail Enforcement Agents.

To the best of my knowledge, the total **amount of equity** in the real estate and/or other collateral at the time of submission of this affidavit is \$ _____. The total value of real estate and/or collateral listed above is \$ _____ and to the best of my knowledge \$ _____ is the amount due under any and all obligations secured by a lien or similar encumbrance against the real estate including real estate taxes, or secured by a pledge of or security interest affecting such property as of the date of submission of this affidavit.

I hereby grant permission for the Virginia Department of Criminal Justice Services to contact any person/entity listed on this form to verify the information, balances, etc. reported on this form. I hold harmless any creditor, business or individual for verifying/reporting information contained on this application.

Print Name: _____

Signature of Bondsman

Date

NOTARY

Commonwealth of _____ County/City: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires: _____

Notary Registration Number: _____

Notary Name (print): _____

Signature: _____ Date: _____