



**COMMONWEALTH OF VIRGINIA**  
**Department of Criminal Justice Services**

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Status Hotline  
 (804) 786-1132  
 1-877-9STATUS

**BAIL BONDSMAN CHECKLIST**

Applicant Name		DCJS ID 99-_____	Date
<b>Bail Bondsman License – Initial or Renewal</b>		<b>Property Bail Bondsman – Additional Documentation</b>	
<input type="checkbox"/>	Initial or Renewal License Application	<b>Property Collateral Verification Form</b>	
<input type="checkbox"/>	Bail Bondsman Firearms Endorsement Application <i>(if applicable)</i>	<input type="checkbox"/>	\$200, 000 Minimum Collateral
		<input type="checkbox"/>	Signature Notarized
<input type="checkbox"/>	Fingerprint Processing Application	<b>Real Estate (property must be free of liens/obligations)</b>	
<input type="checkbox"/>	Fingerprint Card <i>(completed within the past 90 days)</i>	Title Certificate Report (one for each property)	
<input type="checkbox"/>	Legal Presence Documentation	<input type="checkbox"/>	Title Search Supporting Documentation
<input type="checkbox"/>	Criminal History Supplemental Form <i>(if applicable)</i>	<input type="checkbox"/>	Copies of Lien/Obligation Documents
<input type="checkbox"/>	Business License Verification (if applicable)	<b>Appraisal Method</b>	
		<input type="checkbox"/>	Complete Copy of Appraisal
		<input type="checkbox"/>	Third Party Beneficiary Form
		<b>Tax Assessment Method</b>	
		<input type="checkbox"/>	True Copy of Current Tax Assessment
<b>Surety Bail Bondsman</b>		<b>Deed of Trust (One for each property pledged)</b>	
<input type="checkbox"/>	Initial or Renewal License Application	<input type="checkbox"/>	Record in City/County where Located
<input type="checkbox"/>	Additional License Category Application <i>(if applicable)</i>	<input type="checkbox"/>	Deed of Trust – Single Owner
<input type="checkbox"/>	Bail Bondsman Firearms Endorsement Application <i>(if applicable)</i>	<input type="checkbox"/>	Deed of Trust – Husband /Wife
<input type="checkbox"/>	Fingerprint Processing Application	<input type="checkbox"/>	Deed of Trust – Joint Tenants
<input type="checkbox"/>	Fingerprint Card <i>(completed within the past 90 days)</i>	<input type="checkbox"/>	Deed of Trust – Tenants in Common
<input type="checkbox"/>	Legal Presence Documentation	<input type="checkbox"/>	Special Power of Attorney
<input type="checkbox"/>	Criminal History Supplemental Form <i>(if applicable)</i>	<b>Property Ownership – Additional Requirements</b>	
<input type="checkbox"/>	Property & Casualty License	<b>LLC or Corporation</b>	
<input type="checkbox"/>	Power of Attorney from Surety Company	<input type="checkbox"/>	List of Managing Members
		<input type="checkbox"/>	Copy of Operating Agreement
		<b>Family Trust</b>	
		<input type="checkbox"/>	List of Managing Members/All Trustees
		<input type="checkbox"/>	All Authorized Signers
		<input type="checkbox"/>	All Designated Trustees
<input type="checkbox"/>	Initial or Renewal License Application	<input type="checkbox"/>	Complete Copy of the Trust
<input type="checkbox"/>	Bail Bondsman Firearms Endorsement Application <i>(if applicable)</i>	<b>Partnership</b>	
<input type="checkbox"/>	Additional License Category Application <i>(if applicable)</i>	<input type="checkbox"/>	Copy of Operating Agreement
		<input type="checkbox"/>	General Partner
<input type="checkbox"/>	Fingerprint Processing Application	<b>Cash or Certificates of Deposit (One for each Account)</b>	
<input type="checkbox"/>	Fingerprint Card <i>(completed within the past 90 days)</i>	<input type="checkbox"/>	Copy of Financial Statement/Certificate of Deposit
<input type="checkbox"/>	Legal Presence Documentation	<input type="checkbox"/>	Control Agreement – Single Owner
<input type="checkbox"/>	Criminal History Supplemental Form <i>(if applicable)</i>	<input type="checkbox"/>	Control Agreement – Husband/Wife
<input type="checkbox"/>	Special Power of Attorney Appointing Agent	<input type="checkbox"/>	Control Agreement – Joint Tenants
		<b>Release of Collateral</b>	
		<input type="checkbox"/>	Certificate of Partial Satisfaction
		<input type="checkbox"/>	Certificate of Satisfaction