



**DEPARTMENT OF FINANCIAL SERVICES**  
*Division of Agent & Agency Services - Bureau of Licensing*  
 200 East Gaines Street, Larson Building Room 419  
 Tallahassee, FL 32399-0319

**BAIL BOND RATE FILING**

This premium rate filing is made pursuant to Section 648.35(2), Florida Statutes. The following rates are the rates I intend to charge. I understand that I may not deviate from these rates without first amending this filing and then obtaining approval from the Florida Department of Financial Services.

**A. STATE BONDS**

Rate.....	10 %
Minimum Premium.....	\$100

**B. FEDERAL BONDS**

Rate.....	15 %
Minimum Premium.....	\$100

I have read and am familiar with the provisions of Chapter 69B-221, Florida Administrative Code and understand that the following requirements are contained therein:

1. The premium charge shall be a term charge for the term of the bond and not an annual charge on all bail bonds.
2. No additional premium shall be charged when the case is bound over from one court to another except that if a bond is increased, an additional amount may be charged based on the rates I currently use for the amount of the increase on the face of the bond. An additional charge may be made when the case is involved in the State Circuit Court and the Federal Court, as two separate bonds will be necessary.
3. A refund of the premium charge shall be made when the defendant is surrendered prior to the final termination of the surety's liability on the bond unless the surrender is based on a violation of the contract between the defendant and the surety. A refund of the premium shall also be made when it is found that the defendant does not come under the jurisdiction of the court for which the bond was written.
4. Rates as filed and approved by the Department of Financial Services are the only rates, which may be used; the same rate must apply to all similar bonds.
5. Before a rate can be changed, a new filing must be made and approved. I must be able to prove, by my own records, that my previous rates were too high or too low, as the case may be.

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Social Security Number

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City, State and Zip Code

\_\_\_\_\_  
 Telephone Number

\_\_\_\_\_  
 Fax Number

\_\_\_\_\_  
 Email Address

**\*NOTE**

You are required by state and federal law to disclose your social security number on this application. Section 666(a)(13) of Title 42, United States Code, requires each state to obtain the social security number of each applicant for a professional or occupational license on the application for the license. Section 626.171(5), Florida Statutes, implements this federal law. The purpose of collecting social security numbers is for administration of the child support enforcement provisions of Title IV-D of the Social Security Act. The Department of Financial Services also uses social security numbers for identity verification purposes in conjunction with background checks of applicants and for identity verification purposes in the Department's electronic database for licensees and applicants.