

APBBLB



Arkansas Professional Bail Bond Company and Professional Bail Bondsman Licensing Board

October 1, 2023

All Professional Bail Bond Licenses issued under Arkansas Code Ann. §17-19-101 et. seq. expire December 31, 2023. To renew by January 1, 2024 renewal applications, balance sheets, and licensing fees must be received no later than December 1, 2023.

Pursuant to Rule & Regulation 1, Section 18, renewal applications received after December 1 will be processed; however, beginning December 2nd and continuing through December 31, a penalty of one hundred dollars (\$100) per day will be assessed until the packet is received. Renewal applications received after December 15, but prior to December 31, will be processed on the corresponding day in January 2024. (Example: Renewal packet received December 16, 2023 will be processed on January 16, 2024) No bonds shall be issued after December 31 until the new license is issued and received by the bond company/bondsman.

Renewal applications received after December 31, 2023 will be treated as applications for a new license and the applicant will be required to complete the entire licensing process.

Applications will be returned if errors are found, or **if all questions are not answered**. Items *9a and 9b* must agree with *9c* on the Professional Bail Bond Company License Renewal Application REN B-1. **Packets returned will be processed in the order they are re-submitted.**

Pursuant to Rule & Regulation 1, Section 36, **companies are required to retain all records for a period of five (5) years**; therefore, *anything necessary for the preparation of your company's renewal application should be available in your office. Do not call the Board office for information from, or copies of, documents*

previously submitted by you.

Companies shall **submit the following forms** for renewal of a **Company License**:

- | | | |
|----|--------------------------|---|
| 1. | Form REN B-1 | Company Renewal Application |
| 2. | Form REN B-2A | Officer/Director/Shareholder Information Sheet |
| 3. | Form REN B-2B | Business Locations Displaying Advertising |
| 4. | AR920070Z | Identification Bureau Individual Record Check |
| 5. | FBI Release Form 2 Pages | Privacy Requirement 2 Forms |
| 6. | Letter of Credit / CD | Letter of Credit or CD with assignment letter. See Additional Info Next Page |
| 7. | Secretary of State | Good Standing |

900 West Capitol Suite 400 Little Rock, Arkansas 72201.
Phone (501) 682-9050. Fax (501) 682-9053

** If CD Account Number changed from the previous renewal, please attach the CD Agreement from the bank.*

****Please disregard if updated Letter of Credit or CD was submitted with a maturity date for 2024 or later****

The following forms must be **submitted for each Bondsman:**

1. Form REN B-3 Bondsman Renewal Application
 2. AR920070Z Identification Bureau Individual Record Check
 3. Specimen copy of Power of Attorney IF POWER CHANGES
 4. Continuing Education Certificate
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Submit all documents at the same time. Failure to submit the renewal applications so that licenses can be issued by December 31, 2023, will result in the bond company/ bondsman not being able to conduct bail bond business until the 2024 licenses have been issued. **Renewal application for bondsman received after December 31st will be treated as applications for initial licensing and the applicant will have to complete the entire licensing process.**

All professional bail bond companies must include a renewal fee of \$1,000, which includes the fee for the professional bail bond company and one (1) licensed professional bail bondsman. There is a license renewal fee of \$100 for each additional professional bail bondsman.

Please enclose a cashier's check, money order or company check made payable to the Arkansas Professional Bail Bondsman Licensing Board. **PERSONAL CHECKS WILL NOT BE ACCEPTED.**

If your company is incorporated, a certificate of good standing from the Secretary of State must be provided. Also, any amended articles of incorporation bearing the seal of the Secretary of State which have not been filed with the Board must be submitted.

ALL COMPANIES MUST SUBMIT A FINANCIAL BALANCE SHEET LISTING ASSETS, LIABILITIES AND NET WORTH. THIS IS NOT A CERTIFIED PUBLIC ACCOUNTANT STATEMENT.

Sincerely,

Randy Murray Director

2024
RENEWAL APPLICATION FORM B-3
PROFESSIONAL BAIL BONDSMAN LICENSE

COMPANY CODE & LICENSE # _____

I, the undersigned, hereby apply for renewal of the license specified below and submit the following information.

1. Name _____
Last First Middle

2. A. BUSINESS _____
Street City State Zip Phone

B. RESIDENCE _____
Street City State Zip Phone

3. Have you been arrested or been a defendant in court during the last two (2) years? If yes, give complete details, including the court and state where proceeding were held, dates and disposition.
(Attach additional page if necessary)

_____ I hereby certify that I have not been arrested or been a defendant in court during the last
Initials two (2) years.

4. List any elected, appointed or employee position you hold with a city, township, county, state, or federal agency or law enforcement agency, whether you receive compensation or not.
5. List any full or part-time position held with any business or entity other than the bond company you are renewing with.

COMPANY/FIRM	POSITION	DATE EMPLOYED
_____	_____	_____

ATTACH CONTINUING EDUCATION CERTIFICATE

I hereby certify that the foregoing is a true and accurate statement.

Signed: _____
Applicant

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as a job or license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notice and other information and that the results of the check are handled in a manner that protects the applicant's privacy.

- **Officials must provide to the applicant written notice¹ that his/her fingerprints will be used to check the criminal history records of the FBI.**
- **Officials using the FBI criminal history record (if one exists) to make a determination of the applicant's suitability for the job, license, or other benefit must provide the applicant the opportunity to complete or challenge the accuracy of the information in the record.**
- **Officials must advise the applicant that procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.**
- **Officials should not deny the job, license, or other benefit based on information in the criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.**
- **Officials must use the criminal history record solely for the purpose requested and cannot disseminate the record outside the receiving department, related agency, or other authorized entity.²**

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant notice, what constitutes "a reasonable time" for the applicant to correct or complete the record, and any applicant appeal process that is afforded the applicant. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of criminal history records for noncriminal justice purposes.

_____ Applicants Signature _____ Date

¹ Written notification includes electronic notification, but excludes oral notification.

² See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.²

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/ corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

_____ Applicants Signature _____ Date

¹ Written notification includes electronic notification, but excludes oral notification.

² See 28 CFR 50.12(b).

³ See 5 U.S.C. 552a (b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).



ARKANSAS STATE POLICE

ASP-122
(Eff. 09/21/2022)

Identification Bureau Individual Record Check Request Form

Please mark the box if this background check is for U.S. VISA purposes only and requires an Apostille Letter ☐

Full Name: _____
Last name First name Middle name Jr/Sr/III

_____ Daytime Phone #: (____) _____
List ALL other names ever used (married, maiden, shortened, etc)

Date of Birth: _____ State of Birth: _____ Race: _____ Sex: _____
(Month/Day/Year)

Social Security #: _____ Driver's License #: _____
State

Physical Address: _____
Street

AR

_____ City _____ State _____ ZIP

Mailing Address: _____
Street or P.O. Box

AR

_____ City _____ State _____ ZIP

APPLICANT RECORD NOTIFICATION

Change, Correction, or Updating: Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34 and/or Arkansas Code § 12-12-1013.

I give my consent for the Arkansas State Police to conduct a criminal record search on myself and release any results to the following person or entity:

Signature: _____ Date: _____
(First/MI/Last Name) Month/Day/Year

Release to: _____
(First/MI/Last Name) or Full Name of Agency

Mailing Address: _____
Street

_____ City _____ State _____ ZIP

Daytime Phone #: (____) _____

THIS PROPERLY COMPLETED FORM MUST BE NOTARIZED

STATE OF _____

COUNTY OF _____

Subscribed and sworn before me, a Notary Public, in and for the county and state aforesaid, this the _____ day of _____, 20 _____.

Notary Public

APPENDIX D

(COMPANY NAME AND ADDRESS TO BE INSERTED)

_____.

_____.

Company Address

NO. _____.

QUALIFYING POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That _____ (Name of Company) a
_____ (Corporation or Partnership or Sole Proprietorship) having its principal office at:
_____ (street, city, state, and zip) does
hereby make, constitute and appoint _____ (agent) with limited authority, its true and
lawful Agent and Attorney-in-Fact, with full power and authority hereby conferred to sign, execute, acknowledge,
and deliver for and on its behalf as Surety, subject to limitations herein set forth, any and all papers and
documents necessary or incidental to making of Bail Bonds in Judicial Proceedings, whether criminal or civil:
appeal bonds or any other kind of appearance bond in any State Court, County Court or District Court, not to
exceed the amount of:

\$ _____

For any and all bail bonds and recognizances, provided that the said Attorney-in-Fact shall be binding upon this
Company.

IIN WITNESS WHEREOF, the said _____ (name of Company) has caused

these presents to be executed by _____

(Name and Title of Corporate Officer/ Partner/ Proprietor) this _____ day of _____ (Month), 20____.

Name of Company _____ Corp Officer, Partner or Proprietor _____

State of Arkansas

County of _____

On this _____ day of _____, 20__ before me, a Notary Public, personally

appeared _____, who being by me duly sworn, acknowledged that he/she signed
the above Powers of Attorney as Authorized Representative of the said (Name of

Company _____ and acknowledged said instruments to be the voluntary act
and deed of said Company.

My Commission Expires:

Notary Public

Agent / Attorney-in-Fact