

UNPAID PREMIUM AGREEMENT

Defendant Name: _____ Date: _____

Bail Amount: \$ _____

County/Jail: _____

Total Sale Amount: \$ _____

Less Amount Paid: \$ _____

BALANCE DUE: \$ _____

The undersigned promises to pay the Balance Due of \$ _____
in _____ installments of \$ _____ each, with the first installment(s)
due as follows: _____
and every _____ thereafter, until paid in full.

I have deposited as security against this premium balance: **Promissory Note; Indemnity Agreement**

I (we) have obtained a bail bond for the release of the above defendant and I (we) promise to pay the Balance Due as prescribed above. I (we) understand that if my payments are not received at the address stated below within five days of the scheduled due date, I (we) will be charged a ten percent (10%) late fee based on the scheduled payment amount. Should my account become over 30 days past due, this agreement will be considered in default, and a demand for full payment shall be made at that time. Any and all legal/collection that may arise in such an event will be my responsibility.

All payments should be mailed to:

**Integrity Bail Bonds, Inc.
13585 49th St. North
Clearwater, FL 33762**

I HAVE READ AND AGREE WITH THE ABOVE DECLARATIONS

Signature: _____ Signature: _____
Print: _____ Print: _____
Date: _____ Date: _____

Signature: _____ Signature: _____
Print: _____ Print: _____
Date: _____ Date: _____