

**MINNESOTA JUDICIAL BRANCH
STATE COURT ADMINISTRATOR'S OFFICE (SCAO)
CHANGE OF INFORMATION**

Introduction

This form should be used in the following circumstances:

- Contact information changes for an agent, Bonding Agency or Surety Company;
- An agent is changing Bonding Agencies;
- A new Surety Company is added to an agent or Bonding Agency's record

As required in the Bail Bond Program Notices, agents, Bonding Agencies and Surety Companies must **promptly** notify the SCAO, in writing, of any changes in information. The Notices can be reviewed on the Minnesota Judicial Branch's Bail Bond Program website. Failure to comply with the Notice requirements may result in the revocation of approval and removal from the Statewide List of Approved Bail Bond Agents.

Agents: If you are changing Bonding Agencies, and are no longer approved by your previous Bonding Agency employer, be advised that **you are prohibited** from engaging in bail bond work for the new Bonding Agency until your Change of Information Form has been approved.

Part I – Changes to Agent Information

A. Changes ONLY to Agent's Personal Information

If the Change of Information Form is submitted to make changes to the agent's personal contact information the agent must complete Part I of the form and sign and date the form where indicated. The form must also be fully notarized.

Agents: If you are **NOT** changing Bonding Agencies, please simply state the name of the Agency with which you are currently affiliated.

B. Changes to Agent's Personal Information AND/OR Agent's Bonding Agency affiliation

If you are submitting changes to your personal information please see Part A above. Part II must be completed by the new Bonding Agency. Part I and Part II must be signed, dated and fully notarized as appropriate. Only if the applicant is a sole proprietor of the Bonding Agency should the applicant also sign Part II.

Bonding Agency: By signing Part II of the application, you acknowledge that the applicant is employed by and is authorized to post bonds on behalf of your agency; that the agent is authorized by a Surety Company to issue bail bonds on its behalf; that you assume full responsibility for the actions of the applicant; and that you have read and understood the attached notices and will comply with the requirements contained in the notices.

C. Changes to Personal Information AND/OR Agent's Surety Company affiliation.

If you are submitting changes to your personal information please see Part A above. If you are adding an additional Surety Company, or changing Surety Companies, you must completely fill out Part III of the form and attach a Qualifying Power of Attorney for each new Surety Company.

Part II – Changes to Bonding Agency Information

An Authorized Bonding Agency Contact (see Bonding Agency Application Form for more information) must complete and sign Part II of this form for any changes in the Bonding Agency's information. Part II must also be fully notarized.

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Part III – Changes to Surety Company Information

A Surety Company owner or officer authorized to act on behalf of the Surety Company must complete and sign Part III of this form for any changes in the Surety Company's information. Part III must also be fully notarized.

Criminal Background Notice

For purposes of the renewal process, you are not required to submit an authorization form to the Bureau of Criminal Apprehension [BCA] for a full criminal history check. However, please be advised that the SCAO will conduct a criminal background check by accessing the BCA website to obtain public information. (See <http://www.dps.state.mn.us/bca/cjis/documents/cjis-intro.html>)

Approval of Change of Information Form

Change of Information Forms seeking to change an agent's Bonding Agency affiliation or to add a new Surety Company will not be processed until all required documentation is received. All Surety appointments will be verified via the Sircon website (www.sircon.com) and a missing appointment will delay renewal of approval.

When a request to change Bonding Agency affiliation is approved, notice of approval will be sent to the agent, the new Bonding Agency and the new Surety Company(ies).

A request to change Bonding Company affiliation may be denied for the following reasons:

- The applicant is not currently authorized by the Minnesota Department of Commerce to provide bail bonds;
- The bonding company or surety are not currently authorized to do business in Minnesota by the Minnesota Department of Commerce;
- The applicant, the bonding company or the surety company has outstanding/unpaid bonds in any county, state or federal court in Minnesota; or
- A review of the applicant's criminal history or court records shows that the applicant is currently charged with or convicted of: (1) a felony; (2) a crime involving fraud, misrepresentation, false reporting, or misappropriation or conversion of funds; or (3) any other crimes at the gross misdemeanor or misdemeanor level that call into question the applicant's ability, capacity and fitness required to perform the duties and to discharge the responsibilities of a bail bond agent.

In the event your application is denied, you have thirty (30) days from the date of denial within which to submit a written request for review.

Send completed original forms and required documentation to SCAO at:

Bail Bond Applications
State Court Administrator's Office
Court Services Division
25 Rev. Dr. Martin Luther King Jr. Blvd., Suite 105
St. Paul, MN 55155

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**PART I - Applicant
(Please type or print legibly)**

AGENT NAME:

Last

First

Middle

Maiden, Alias or Former Name(s) (if applicable)

HOME/PERSONAL CONTACT INFORMATION CHANGE:

Street

Apt. #

City

State

Zip code

()

()

Home Phone

Cell Phone

Email Address

CERTIFICATION OF APPLICANT:

I certify that all of the information submitted in Part I of this application and any attachments is true and complete. I acknowledge that I have read the Bail Bond Program Notices posted on the Minnesota Judicial Branch Bail Bond website and certify that I will comply with the requirements contained in these notices in the event the SCAO approves my request.

Applicant Signature

Date (MM/DD/YYYY)

Name of Applicant – printed

Subscribed and sworn to before me this

___ day of _____, 20___

Notary Stamp

Notary Public

My commission expires:

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**PART II - Bonding Agency
(Please type or print legibly)**

BONDING AGENCY NEW INFORMATION:

Name

Street

City

State

Zip code

()

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Phone

Fax

Email address

Authorized Bonding Agency Contact

Please answer the following question by checking the correct response. If your response is Yes, please provide details.

Do you, your general agents, or Surety Company(ies) have any outstanding or unpaid bonds in any county, state, or federal court in the State of Minnesota? ___ Yes ___ No

CERTIFICATION OF BONDING AGENCY (For changes from one Bonding Agency to another)

I, _____, hereby certify that the above named individual is employed by and is authorized to post bonds on behalf of _____.
This agent is backed by the above named Surety Company(ies), which is (are) authorized to do business in the State of Minnesota. The Agency assumes full responsibility for the actions of this agent. It is the responsibility of our Agency to notify the SCAO of any change in this agent's employment or liability status.

Signature of Authorized Bonding Agency Contact

Date (MM/DD/YYYY)

Name of Authorized Bonding Agency Contact – print

Title

Subscribed and sworn to before me this

Notary Stamp

____ day of _____, 20____.

Notary Public

My commission expires:

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**PART III – Surety Company
(Please type or print legibly)**

NEW SURETY INFORMATION:

Name	Surety Contact		
Street	City	State	Zip
()	()		
Phone	Fax		

SECOND SURETY (if applicable):

Name	Surety Contact		
Street	City	State	Zip
()	()		
Phone	Fax		

REMEMBER TO ATTACH A QUALIFIED POWER OF ATTORNEY FOR NEW SURETY COMPANIES
