

Change of Surety Affiliation

Submission Instructions

Include these required	documents:	
\square A completed ar	nd signed Change of Surety Affiliat	ion Form
☐ A current Quali surety)	fied Power of Attorney (QPOA) fro	om all <i>new</i> appointing sureties for each agent (if adding a new
Email to: BailBondProg	gram@courts.state.mn.us	
Bail Bond Agency	/ Agent Information	
•		requesting a change of surety affiliation for an agent. If this a list of all agent names and their bail bond license numbers on
Agency Name:		
Agency License #:		
Agent Name:		
Agent's Bail Bond I	License #:	
Surety Request Ty	ype and Information	
Please indicate the req	uest type below. If adding a new	surety, you must include a QPOA.
☐ Adding Surety	☐ Removing Surety	
Change Effective D	rate (MM/DD/YYYY):	
Surety Name:		
Surety Authorized	Contact (receives SCAO notification	ons):
Mailing Address:		
City:	State:	
Zip Code:	Phone #:	
Email Address:		
Agency Certificati	ion	
I certify that all of the i	nformation submitted in this form	and attachments are true and complete.
Signature of Agency Au	ithorized Representative:	Date of Signature (MM/DD/YYYY):
Printed Name of Agend	cy Authorized Representative:	<u> </u>
Title:		