

BUDGET BAIL BONDS

121 Gass Ave
Las Vegas, NV 89101
(702) 369-2245

ALL premium/collateral refunds must be *requested in writing*.

Attached to the request must be copies of:

1. The original receipt(s)
2. Valid State identification of the individual who paid the premium/collateral.

Collateral will be returned on the 1st and 15th day of each month between the hours of 1:00 p.m. and 4:00 p.m. Should the 1st or 15th fall on a weekend or holiday, then disbursement will be on the next business day.

Bond premiums are non-refundable once the bond is accepted by the court and receipt is given from the court.

Requests for return of bond premiums not written or posted must be accompanied by original receipt and photo ID or depositor.

Any voided bond that is not the fault of Budget Bail Bonds will be charged a \$50.00 fee FOR EACH VOIDED BOND.

In the event you are arrested and returned to custody, management has the right to revoke any other outstanding bond(s).

Defendant

Date

Indemnitor

Date

BUDGET BAIL BONDS

PLEASE READ CAREFULLY

1. ANY EXCHANGE OF COLLATERAL OR CO-SIGNER USED TO SECURE THE BOND MUST BE APPROVED BY MANAGEMENT
FEE: \$400.00

2. MANAGEMENT ASSUMES NO RESPONSIBILITY FOR ANY DAMAGES OCCURRED TO A VEHICLE HELD IN STORAGE FOR EITHER COLLATERAL OR PREMIUM. STORAGE FEES WILL APPLY.
FEE: \$5.00 PER DAY PLUS \$50.00 LIEN FEE ON 3RD AND 15TH DAY.

3. A RECONVEYANCE WILL NOT BE ISSUED UNTIL THE RECORDING FEES HAVE BEEN PAID FOR THE INITIAL DEED OF TRUST AND THE DEED OF RECONVEYANCE.
FEE: \$75.00 EACH

4. THE INDEMNITOR IS LIABLE FOR THE BOND UNTIL THE CASE IS CLOSED OR THE BOND EXONERATED.

_____	_____	_____
WITNESSED BY	DEFENDANT	DATE
_____	_____	_____
WITNESSED BY	INDEMNITOR	DATE

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.
Notary Public in and for the County of Clark, State of Nevada.

Notary Public