

State of California
Application to Renew Bail License
LIC 431-1B (Rev 04/2025)

Department of Insurance

Name: _____ License Expiration Date: _____ / _____ / _____
Last, First, Middle or Business Entity Name Month Day Year

Bail License Number _____ NPN (individual) _____ FEIN (Business Entity) _____

Current renewals can be renewed faster online at www.insurance.ca.gov, under Online Services.

PLEASE NOTE: Online Renewals are not currently available for Bail Fugitive Recovery Agents, and this form must be used to renew.

Check license type(s) you are renewing

☐ Bail Agent \$188 per surety* ☐ Bail Solicitor \$188 per employer* ☐ Bail Permittee \$788* ☐ Fugitive Recovery Agent \$188

Renewal Application Certifications

1. Have you and/or, your organization or any of its officers, directors, or 10% or greater shareholders been convicted of a crime which has not been previously reported to the California Department of Insurance? ☐ Yes ☐ No

"Crime" includes a felony, a misdemeanor or a military offense. "Convicted" includes, but is not limited to, having been found guilty by a verdict of a judge or jury, having entered a plea of nolo contendere, no contest, having had any charge expunged, dismissed or plea withdrawn pursuant to Penal Code 1203.4, or having been given probation, a suspended sentence or a fine. You may exclude traffic citations and juvenile offenses tried in juvenile court. You should answer "yes" if you have been convicted of a felony or a misdemeanor including driving offenses such as, but not limited to, reckless driving, driving under the influence and driving with a suspended license, whether or not you spent any time in jail, and whether or not you believe the conviction has been removed from your record.

2. Have you and/or, your organization or any of its officers, directors, or 10% or greater shareholders been involved in any administrative disciplinary action which has not been previously reported to the California Department of Insurance? ☐ Yes ☐ No

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. **Include** any business so named because of your actions in your capacity as an owner, partner, officer, director, or member or manager of a Limited Liability Company. You may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

Important Notice: If you have answered "Yes" to 1 or 2, attach a detailed statement, signed by you (original signature), of the events which led to the charges (dates and places). If the matter was heard in court, attach copies, **Certified by the Court**, of the Criminal Complaint and Minute Order showing the final plea, judgment and sentence.

Applicant's Certifications: I certify (or declare) under penalty of perjury, under the laws of the State of California, that I have read the forgoing renewal application and certifications and know the contents thereof and that each statement therein made is full, true and correct. Pursuant to Insurance Code Sections 1703 and 1733, I authorize disclosure to the Insurance Commissioner of all financial institution records of any fiduciary accounts for the duration of this license. I understand that any changes in background information (per CIC 1729.2) must be filed within 30 days or my license can be subjected to disciplinary action. I certify that I am in compliance with the background information reporting requirements of CIC 1729.2.

3. ► _____ (_____) _____
Signature of applicant or authorized representative (of organization) Date City/State Telephone

4. _____
Print name E-mail address

A valid bail bond and surety appointment are required to be on file with the CDI in order to renew any bail license.

If you are a bail agent and you have no active surety company appointment on file, you will need to submit a surety company appointment along with a signed, dated forms filing list, and the \$311 surety company appointment fee**. In addition, if you wish to terminate any appointment on file, attach a request with your original signature to your renewal application, indicating which surety company appointment(s) you wish to cancel.

Additional Bail Business Entity renewal requirements:

- Bail corporations will need to attach the Bail Disclosure form LIC 437-25A for a list of current officers, directors and stockholders.
- Pursuant to the California Insurance Code (CIC) Section 1810 (a) (4) and (5), all shareholders, officers and directors of a corporation shall be licensed bail agents, and shall be disclosed to the department. Any sale or transfer of stock or other interests in the corporation shall require the prior approval of the California Department of Insurance (CDI). Form LIC 437-25, Bail Agent Change of Corporate Stockholder, Officer or Director, can be accessed from the CDI website at www.insurance.ca.gov.

* New Bail Renewal Fees: Bail Agents pay \$188 per surety company appointment; Bail Solicitors pay \$188 per employer; Bail Fugitive Recovery Agents pay \$188, and Bail Permittees pay \$788.

** Surety Appointments: the surety appointment fee is \$311.

Notice: Information Collection and Access

California Business and Professional Code section 31(e) allows the California Department of Tax and Fee Administration and the Franchise Tax Board to share taxpayer information with the California Department of Insurance. Applicants and licensees are required to pay all state tax obligations and failure to comply with this requirement may result in suspension of license(s) issued by the California Department of Insurance.

Privacy Notice on Collection and Access:

This notice is provided pursuant to the Information Practices Act of 1977 (California Civil Code section 1798.17), which requires that the following be provided when collecting specific personal information from individuals:

AGENCY: California Department of Insurance, Licensing and Administrative Business Bureau

ADDRESS: 300 Capitol Mall, 16th Floor, Sacramento, CA 95814-4309

TELEPHONE NUMBER: (800) 967-9331

TITLE OF OFFICIAL RESPONSIBLE FOR INFORMATION MAINTENANCE: Chief, Licensing and Administrative Business Bureau

AUTHORITY WHICH AUTHORIZES THE MAINTENANCE OF THE INFORMATION: California Insurance Code, Division 1, Part 2, Chapters 5 through 8.

THE CONSEQUENCES, IF ANY, OF NOT PROVIDING ALL OR PART OF THE REQUESTED INFORMATION: It is mandatory that you provide all information requested. Omission of any item of requested information will result in the application being rejected as incomplete.

THE PRINCIPAL PURPOSE(S) FOR WHICH THE INFORMATION IS TO BE USED: The information requested will be used to: positively identify applicants and licensees; determine qualifications for licensure or certification; to administer and require compliance with the insurance laws; to ensure compliance with tax laws; and to ensure compliance with child support obligations.

KNOWN OR FORESEEABLE DISCLOSURES: The information requested may be disclosed for licensing, certification, and regulatory purposes, tax administration, and administration of child support obligations, or as permitted or required by law.

YOU HAVE THE RIGHT TO ACCESS FILES CONTAINING YOUR INFORMATION WHICH ARE MAINTAINED BY THE AGENCY, UNLESS THE INFORMATION IS CLASSIFIED AS CONFIDENTIAL UNDER CIVIL CODE SECTION 1798.3(a). TO REQUEST ACCESS, CONTACT: THE LICENSING AND ADMINISTRATIVE BUSINESS BUREAU, 300 CAPITOL MALL, 16TH FLOOR, SACRAMENTO, CA 95814-4309, (800) 967-9331.

Any personal information is collected pursuant to limitations contained in the Information Practices Act of 1977 (California Civil Code Section § 1798 et. Seq).

The California Department of Insurance has developed policies regarding the privacy of your information.

All fees are filing fees and are not refundable whether or not the renewal application is acted upon per Section 1751.5 of the CIC.

Make check payable to: California Department of Insurance, Mail to: P.O. Box 311, Sacramento CA 95812-0311, Bail Information: (916) 492-3035.