

RIVERSIDE COUNTY SHERIFF'S DEPARTMENT
Bail Inquiry Form

In order to ensure compliance with California Code of Regulations, this Bail Inquiry Form shall be completed prior to an inmate bail bond visit or bond drop off. Requirements posted at www.insurance.ca.gov.

Check one:

- Bail Bond Drop Off**
- Bail Bond Inmate Visit**

Date: _____

Bail Bond Agency: _____ Bus. Ph# _____

Your name: (Please Print) _____ Lic. # _____

Are you properly licensed with the Department of Insurance? Yes ___ No ___

Print Name of Inmate & Booking Number _____

Pursuant to Department of Insurance, Title 10, Section 2079, "No bail licensee shall solicit bail except in accordance with Section 2079.5 and from:

- (a) An arrestee;
- (b) The arrestee's attorney;
- (c) An adult member of the arrestee's immediate family;
- (d) Such other person as the arrestee shall specifically designate in writing. Such designation shall be signed by the arrestee before the solicitation, unless prohibited by the rules, regulations or ordinances governing the place of imprisonment. If so prohibited, it may be signed after release of the arrested to ratify a previous oral designation made by him."

Please indicate how your agency was contacted and who contacted your agency to post the bond:
(This information may be used to verify compliance with California Code of Regulation)

___ The inmate ___ Inmate's attorney ___ Inmate's immediate family ___ Other

Name: _____ Phone#: _____

Bail bond drop offs or visits may be delayed or denied if the Sheriff's Department feels the provisions of the Insurance Code are being violated.

I am familiar with the California Code of Regulations and Insurance Code regulations in respect to the execution and delivery of bail bonds.

Failure to complete this form accurately and completely may result in a delay.

Signature: _____

Deputy accepting form (Print name and #): _____

Distribution: Original Bail bond Drop Off – Forward to BO
Original Bail Bond Inmate Visit – Forward to RPDC, Bail Liaison