BAIL PRODUCER: [stamp must include name, address, phone no. and license no.]

The North River Insurance Company

11490 Westheimer Rd., Suite 300 • Houston, TX 77077
P.O. Box 2807 • Houston, Texas 77252-2807
(713) 954-8100 • (713) 954-8389 FAX
Email: CourtNotices@cfins.com

FLORIDA ADDENDUM TO DEFENDANT BAIL BOND APPLICATION AND AGREEMENT

This Florida Addendum ("Addendum") is attached to and forms part of the Defendant Bail Bond Application and Agreement signed, sealed and delivered by you as Defendant ("Agreement") and is incorporated into the Agreement by this reference. Any capitalized terms used in this Addendum without definition shall have the meanings assigned to these terms by the Agreement.

| | No. | dated | for v | which Surety or its agent sh | all receive a premium in the |
|-----|---|-------------------------|---------------------------|------------------------------|-------------------------------|
| | amount of | | Dollars (\$ |), and Surety and | you agree that the Bond is |
| | conditioned upon your full compliance of all of these terms and conditions and is a part of the Bond and Agreement: | | | | |
| | 1. Surety, as bail, shall have control and jurisdiction over you during the term for which the Bond is executed and shall have the right to apprehend, arrest and surrender you to the proper officials at any time as provided by law. | | | | |
| | 2. In the event your surrender is made prior to the time set for your appearances, and for reasons other than as enumerated below in paragraph 3, then a refund of the Bond premium shall be made to the person whose name appears as Payer on the Premium Receipt. | | | | |
| | 3. It is understood and agreed that the happening of any one of the following events shall constitute a breach of your obligations to Surety, and Surety shall have the right to immediately apprehend, arrest and surrender you, and no person shall have any right to any refund of premium whatsoever. The events which constitute a breach of your obligations hereunder are: | | | | |
| | (a) If you depart the jurisdiction of the court without the written consent of the court and Surety or its agent;(b) If you move from one address to another within the State of Florida without notifying Surety or its agent in writing prior to moving; | | | | |
| | (c) If you commit any act which constitutes reasonable evidence of your intention to cause a forfeiture of the Bond;(d) If you are arrested and incarcerated for any offense other than a minor traffic violation; or(e) If you make any material false statement in the Agreement. | | | | |
| В. | INFORMATIONAL NOTICE Section 200 E. Gaines St. T | | | : Florida Department of F | inancial Services Bail Bond |
| C. | The person whose name appears as Payer on the Premium Receipt shall be entitled to a refund of premium for the Bond if and whe it is found that Surety had no liability under the Bond because you do not come under the jurisdiction of the court to which yo are returnable or you are not released from custody, except where the Bond is written to allow you to serve a sentence in anothe jurisdiction. | | | | |
| D. | Except as expressly provided in this Addendum, all terms and conditions of the Agreement remain in full force and effect. In the event of a conflict between the terms and conditions of the Agreement and this Addendum, this Addendum shall control. | | | | |
| Ε. | This Addendum shall be at | tached to every Defenda | ant Bail Bond Application | n and Agreement entered ir | nto in the State of Florida |
| | ny person who knowingly a ntaining any false, incompl | | | | nt of claim or an application |
| Sig | gned, sealed and delivered t | his day | of | , 20 | |
| | | | | | |

Printed Name of Defendant