

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

United States Fire Insurance Company
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**NORTH DAKOTA ADDENDUM
TO
INDEMNITOR APPLICATION AND AGREEMENT**

This North Dakota Addendum (“Addendum”) is attached to and forms part of the Indemnitor Application and Agreement signed, sealed and delivered by you as Indemnitor (“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.

1. Any collateral or other indemnity shall be returned to the person whose name appears as Depositor on the Collateral Receipt immediately upon final termination of liability on the Bond.
2. 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.
3. This Addendum shall be attached to every Indemnitor Application and Agreement entered into in the State of North Dakota.

Signed, sealed and delivered this _____ day of _____, 20_____.

Defendant’s Name

Signature of Indemnitor

Bond Amount

Printed Name of Indemnitor