



MISSOURI DEPARTMENT OF COMMERCE AND INSURANCE  
REGULATORY SERVICES SECTION  
**MISSOURI GENERAL BAIL BOND AGENT  
SIGNATURE FORM**

**Questions:** [regulatory.services@dci.mo.gov](mailto:regulatory.services@dci.mo.gov)

General bail bond agents will need to complete and sign this form. The completed form will need to include the name of the individual applying for the bail bond agent license or renewal, along with the general bail bond agent's name, license number, address, and signature. If the bail bond agent is working under the authority of more than one general bail bond agent, a copy of this form will need to be completed and signed by each general bail bond agent under whose authority they will be working. Once you have completed this form, please provide a copy to the individual working under your authority for the individual to include with the application or renewal.

**PRINT** NAME OF APPLICANT WORKING UNDER YOUR AUTHORITY

**PRINT** NAME AND LICENSE NUMBER OF GENERAL BAIL BOND AGENT

ADDRESS OF GENERAL BAIL BOND AGENT

ORIGINAL SIGNATURE OF GENERAL BAIL BOND AGENT