

A ROYAL FLUSH BAIL BONDS

1206 South Main Street
Las Vegas, Nevada 89104
702-478-1500 / Fax 702-405-6284

INTENSIVE SUPERVISION AGREEMENT

It is agreed between A ROYAL FLUSH BAIL BONDS and the DEFENDANT,
_____, as a specific condition
of his/her release on bail, that the defendant physically sign-in / call-in at our
office weekly on the calendar day of _____.

A FAILURE TO COMPLY WITH THIS AGREEMENT IS A VIOLATION OF THE
BAIL BOND RELEASE AND THE DEFENDANT MAY BE REARRESTED AND
SURRENDERED INTO CUSTODY.

X _____ (____)_____-_____
DEFENDANT SIGNATURE DATE TELEPHONE NUMBER

X _____ (____)_____-_____
INDEMNITOR SIGNATURE DATE TELEPHONE NUMBER

LIABILITY \$ _____ PREMIUM OWED \$ _____

ESCROW _____

CONDITIONS: _____

CURRENT ADDRESS	PHONE	DATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____