

**ASSIGNMENT OF SECURITY INTEREST TO COMAL COUNTY BAIL BOND BOARD**

**ASSIGNOR, SECURITY AND FINANCIAL INSTITUTION:**

Please print

Assignor's name (authorized applicant, first and last name):	Social Security or FEN/EIN:
Title(s) of Assignor (i.e. owner, partner, president, secretary, etc):	
Assignor's mailing address (Number and Street or P.O. Box, City, State, ZIP Code):	
Assignor's entity name (name as it is used on application or in Bail Bond Board records):	Bail bond license number:

Type of Security:	ID Number of CD:
<b>Non-Negotiable Certificate of Deposit</b>	

Name of account or payee of Security (as it reads on the CD):	First maturity Date:

Dollar Amount of Security (in words):	Dollar Amount of Security (in numbers):

Name of Financial Institution:

Mailing address of Financial institution (Number and Street or P.O. Box, City, State, ZIP Code) & telephone number

**SECURITY AGREEMENT AND UNDERSTANDING OF THE PARTIES:**

In order to obtain a Bail Bond License and/or for the purpose of providing security pursuant to the Texas Occupations Code and Texas Code of Criminal Procedure (including all future liability), the Assignor specified above, for and on the behalf of the bail bond license specified above, assigns and sets over irrevocably to the Comal County Bail Bond Board and the State of Texas a security interest in and to the Security described above.

Assignor agrees that this assignment carries with it the right to any insurance on the Security that may now or in the future exist and includes and gives to the Comal County Bail Bond Board and to the State of Texas separately the exclusive right to redeem, collect and withdraw at any time any part of or the full amount of the Security to be applied as a payment to satisfy a judgment against the Assignor and/or the license holder in accordance with the Texas Occupations Code and Texas Code of Criminal Procedure, including payment under Occupations Code Section 1704.204(b). The right of the Bail Bond Board or the State of Texas to apply the Security shall not be affected by a subsequent change in the trade name or business location of the person or entity on whose behalf this assignment is executed.

Assignor understands and agrees that by this assignment, all use of and control over the disposition of the Security is relinquished. The Security is to be held by the financial institution identified for the sole use and subject to the exclusive control of the Comal County Bail Bond Board and the State of Texas.

**This is notification by the Assignor to the financial institution of the terms of this assignment.**

Assignor's Signature:	Assignor's name in print:	Date
Sworn to or affirmed before me on this ____ day of _____, 20____.		Notary stamp or seal:
Signature of Notary Public in and for the State of Texas:		

**CONTROL AGREEMENT WITH FINANCIAL INSTITUTION AND NOTICE OF EXCLUSIVE CONTROL:**

The Financial Institution acknowledges the assignment of the Security for payment of final judgments of forfeiture to the Comal County Bail Bond Board and the State of Texas. We certify that we have recorded the assignment and have retained a copy. We certify that we do not have, nor do we have knowledge of, anyone else having any lien, encumbrance, right, hold, claim to or obligation of the Security. We accept the Security with knowledge that it has been irrevocably posted as collateral, and we agree to act as the sole agent for the purpose of holding the Security for the Comal County Bail Bond Board and the State of Texas. We agree to comply with the instructions of the Comal County Bail Bond Board and/or the Comal County Criminal District Attorney's Office (on behalf of the State of Texas) directing disposition of the Security without further notice to or consent by the Assignor. We further agree not to exercise any set of rights we may have with respect to the Security or to otherwise impede, hinder, delay, prevent, obstruct or interfere with the Comal County Bail Bond Board's or the State of Texas' right to direct payment of, redeem, or collect any part (or the full amount) of the Security promptly.

Name of Bank Officer (Type or print):	Title:
Officer's Signature:	Date:
Sworn to or affirmed before me on this _____ day of  _____, 20_____.	Notary stamp or seal:
Signature of Notary Public in and for the State of Texas:	

**Please send original form to the Comal County Bail Bond Board, c/o Comal County Sheriff's Office, attn: Bail Bond Secretary 3005 West San Antonio Street, New Braunfels, Texas 78130**