

For official use only: Agency _____ Defendant _____ Bond#(s): _____ _____
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**CERTIFICATE OF 8% PREMIUM**

Please check the appropriate box, complete the information, attach any required documents and submit to Aladdin Bail Bonds at 721 Mendocino Ave., Santa Rosa CA 95401, or via facsimile to 707-575-8480.

**Attorney**

The law office(s) of \_\_\_\_\_ located at \_\_\_\_\_  
 phone \_\_\_\_\_, was retained \_\_\_\_\_, 20\_\_\_\_ to represent defendant \_\_\_\_\_  
 for the case #(s) \_\_\_\_\_.

_____ Attorney's Signature Or	_____ Attorney's Name	_____ Date
_____ Signature of Legal Representative of Law Office	_____ Representative's Name	_____ Date

Aladdin Bail Bonds has an 8% rate filed with the State Department of Insurance for defendants with Private Retained Legal Representation. Proper evidence must be provided to ensure legal compliance. Please assist us in protecting this premium adjustment for our client by completing the information above and returning it to us at your earliest convenience. Thank you.

**Union**

I, \_\_\_\_\_, declare: I am a member of \_\_\_\_\_ Union. (Union No. \_\_\_\_\_).  
 (Print Union Member Name)

_____ Declarant Signature	_____ Declarant Name (Printed)	_____ Date
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Please return form only if copy of union card and pay stub or other verifiable proof is attached.

**Military**

I, \_\_\_\_\_, declare:  
 (Print Military Member's Name)

I am a \_\_\_\_\_ in the United States \_\_\_\_\_, and I am the  
 (Insert Title/Rank) (Insert Military Branch)

legal \_\_\_\_\_ of \_\_\_\_\_  
 (Insert Relationship) (Print Client Name)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand that Two Jinn, Inc. is relying on the truthfulness of this declaration and I agree to indemnify Two Jinn, Inc. for any claims arising out of its reliance on this declaration. Executed this \_\_\_\_\_<sup>th</sup> day of \_\_\_\_\_, 20\_\_\_\_.

_____ Declarant Signature	_____ Declarant Name (Printed)	_____ Date
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Military Identification Inspected on \_\_\_\_\_ by: \_\_\_\_\_  
 (Date) Aladdin Agent Name (Printed) Aladdin Agent Signature

Please attach available proof of service.

**ACKNOWLEDGEMENT OF 8% PREMIUM POLICY**

Aladdin Bail Bonds maintains an 8% premium rate filed with the State Department of Insurance for (1) Defendants who have retained private defense counsel; (2) Defendants and/or Indemnitors enrolled in a labor union; and (3) Defendants and/or Indemnitors who are members or veterans of the United States Military (and their immediate family members). In order to qualify for the 8% rate, proper evidence must first be received by Aladdin Bail Bonds as set forth below.

- **Retained Private Defense Counsel:** A letter from the attorney retained or a copy of the contract between attorney and client must be received by Aladdin within thirty (30) days of the bond execution date.
- **Union Members:** The Indemnitor or Defendant must be currently enrolled in a union or receiving disability or retirement benefits from a union and must provide Aladdin proof within thirty (30) days of the bond execution date. Proof may include (1) a current Union card which displays a future expiration date; (2) a union card combined with a recent pay stub; or (3) proof of payment of current Union dues (not health care cards). If Union proof documents are questionable, a current letter from the Union stating that the member is in good standing will be required. Recent pay stubs, letters from unions, and other proofs reflecting past dates must be dated not more than 30 days from the date of bail bond execution and must show that the customer is in good standing with the organization.
- **Active or Honorably Discharged Veteran Members of the U.S. Military and their Immediate Family Members:** Defendants and/or Indemnitors who are members of the Military must provide Aladdin proof of Military service within thirty (30) days of the bond execution date. ~~If the customer is immediate family of a member of the Military and does not possess their own Military ID and/or other proof, a signed declaration~~ from the member of the Military along with verification of the member's ID or other proof of service must be received within thirty (30) days of the bond execution date. Immediate family is defined as a legal parent, spouse, child, adopted or foster child, sibling or half sibling. Proof of military service may include a copy of Form DD 214 or recent Leave & Earnings statement dated not more than 30 days from the date of bail bond execution.

If proper evidence is received within the allotted time period defined above, Aladdin will notify all customers by mail that the premium rate has been reduced to 8%. The account balance and supporting documents will also be adjusted to reflect the new rate.

I have read and understood the 8% Premium Policy and agree to its terms:

\_\_\_\_\_  
 Indemnitor Signature

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Indemnitor Signature

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

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 Indemnitor Signature

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 Print Name

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 Date

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 Indemnitor Signature

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Defendant Signature

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date