

Dear bail agents, designated bail agents, and bail business entities,

The Administrative Office of the Courts (AOC) is coordinating the bail agent, designated bail agent, and bail business entity registration process for the Superior Court, Court of Common Pleas, Family Court, and Justice of the Peace Court for the upcoming year, 2024. Along with the completed registration form, all documentation, as specified in the Bail Packet Submission Guidelines, must be filed with the AOC to ensure your continued ability to post bonds. Please note that only licensed bail agents should be filling out these forms because the AOC authorizes only licensed agents to conduct bail business in the courts.

Each bail agent, designated bail agent and bail business entity registering for the Superior Court, Court of Common Pleas, Family Court, and Justice of the Peace Court must submit a completed registration form with the supportive documentation (see attached application packet) by **Friday, December 22, 2023**, to ensure a timely review by the AOC. If we receive your completed application packet by December 22, the current bail registration will remain active through January 15, 2024, which will allow the Administrative Office of the Courts time to review the 2024 registration packets and approve them by the middle of January.

For entities that operate in New Castle County, if you do not have a copy of your 2024 Wilmington business license by December 22, 2023, you must provide a clear and legible copy of a receipt from Wilmington showing that the license fee has been paid. If, and only if, that receipt is provided to AOC will you be given until February 1, 2024, to provide the AOC a copy of the new business license. Failure to provide a copy of the new Wilmington business license by February 1, 2024, will result in the entity being suspended in New Castle County until a copy is provided to AOC.

Your registration documentation must be *notarized*, and it should only be submitted to the address given below. The Filing and Payment Center will forward the information to the Administrative Office of the Courts. Please be advised that **you will only be authorized to post bonds in the jurisdictions in which you have provided a valid city / town / municipality license.**

All bail agents and designated bail agents shall abide by the Codes of Conduct and Administrative Directives for the applicable court(s):

- Superior Court – [Superior Court Administrative Directive 2013-5](#)
- Court of Common Pleas - [Court of Common Pleas Rules of Conduct for Bail Agents and Property Bail Agents, Administrative Directive No. 2016-1 Automated Bail Posting Procedures](#)
- Family Court - [Policy Memorandum Regarding Bail Bonds](#)
- Justice of the Peace Court - [Policy Directive 87-106 \(Revised\)](#)

Please submit the original registration form(s) along with all other required attachments to:

**Bail Bond Registration  
Filing and Payment Center  
Attn: AOC Reception Desk  
500 N. King Street, Suite 1700  
Wilmington, DE 19801-3704**

The above information can also be found at <http://courts.delaware.gov/help/bail/bailagent.aspx>

Thank you for your cooperation in this effort. Should you have any questions, please contact Debbie Grossman at the AOC by telephone at 302-255-0087 or by email at [AOCBail\\_Agent\\_Reg@delaware.gov](mailto:AOCBail_Agent_Reg@delaware.gov).

Sincerely,

*Debbie Grossman*

Debbie Grossman  
Office Manager  
Administrative Office of the Courts  
405 N. King Street, Suite 507  
Wilmington, DE 19801  
302-255-0087

Enclosure

# The Administrative Office of the Courts

## For the State of Delaware

### BAIL REGISTRATION FORM

**SECTION 1:**

**General**

DESIGNATION:  Bail Agent  Designated Bail Agent  Bail Entity

TYPE OF BAIL:  Property(Cash)  Surety Only  Property(Cash) & Surety

AUTHORIZED TO PICK UP CASH:  Yes  No N/A (Entity)

COURTS to which you are applying:  Superior Court  Family Court  
(SELECT ALL THAT APPLY)  Court of Common Pleas  Justice of the Peace Court

COUNTIES to which you are applying:  New Castle County  Kent County  Sussex County  
(SELECT ALL THAT APPLY)

Name of Agent (if bail entity leave blank) \_\_\_\_\_

Driver's License or State ID # (if bail entity leave blank) \_\_\_\_\_

Legal name of business: \_\_\_\_\_

Trade Name/Doing Business As (If Applicable): \_\_\_\_\_  
As registered in the respective county's Prothonotary's Office, see 18 Del C. § 4350 (e)

Trade Name/Doing Business As (If Applicable): \_\_\_\_\_  
As registered in the respective county's Prothonotary's Office, see 18 Del C. § 4350 (e)

Office Address: \_\_\_\_\_  
Street Apt / Suite / Other City State Zip

Telephone Number: \_\_\_\_\_ Employer Identification Number: \_\_\_\_\_  
(If sole proprietorship, use your Social Security Number)

Email address: \_\_\_\_\_

**Licensing**

*Please provide the following licensing information. If specified, please also attach*

	Number
Delaware Dept. of Insurance Producer License:	
Delaware Dept. of Insurance Business License:	
Delaware Div. of Revenue Business License:	
Local/Municipality Business License(s): <i>City of Wilmington</i>	
<i>City of Dover</i>	
<i>Town of Georgetown</i>	
Delaware Dept. of Insurance Certificate of Authority:	

Have you ever been convicted of a felony?  Yes  No If yes, state all pertinent facts and circumstances including when and where the offense was committed: \_\_\_\_\_

Has the Department of Insurance or a Court ever revoked, suspended or denied your business license, or has a Surety ever revoked and/or suspended your insurance coverage? Yes  No  If yes, state all pertinent facts, dates and circumstances (attach additional page if needed). \_\_\_\_\_

**Insurance/Surety Company**

Attach Power of Attorneys for Each Court and County Each Bail Agent and Entity must supply:	Justice of the Peace Court	Court of Common Pleas	Family Court	Superior Court
Surety Power of Attorney – New Castle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surety Power of Attorney – Kent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surety Power of Attorney – Sussex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*NOTE: Attach an original Power of Attorney, bearing the insurance company's corporate seal, for each county wherein you plan to conduct business.*

*NOTE: If you are represented by more than one surety company, please attach a second copy of this sheet with that information provided in the boxes above.*

Name: \_\_\_\_\_ N.A.I.C. #: \_\_\_\_\_

Office Address: \_\_\_\_\_  
Street Apt / Suite / Other City State Zip

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**SECTION 2:** *To be completed by a designated bail agent only*

I _____ having read this form in its entirety do certify that <i>Name of Designated Bail Agent</i>	
_____ is affiliated with the bail bond entity named in SECTION 1. <i>Name of Bail Agent Applicant</i>	
Additionally, I have provided the Bail Agent with physical copies of the respective courts Policy Memorandum / Policy Directive which govern the conduct of a bail agent before each of the respective courts selected in SECTION 1. I certify that these statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.	
Notarized Signature and Title of the Designated Bail Agent	Printed Name of Designated Bail Agent
Sworn to and subscribed before me this _____ day of _____ , _____	
_____	_____
Notary Public	Date
My Commission Expires: _____	

**GUARANTOR TO SATISFY BAIL FORFEITURE JUDGMENTS FOR ABOVE LISTED BAIL BUSINESS ENTITY**

The Guarantor (Designated Bail Agent) listed below has provided the bail business entity with a guarantee to pay the bail forfeiture associated with bail recognizance written by the bail business entity listed in SECTION 1:

Name of Guarantor: \_\_\_\_\_

**DELAWARE DEPARTMENT OF INSURANCE INFORMATION**

Bail Entities' DOI business license number #: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt / Suite / Other City State Zip

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**SECTION 3:** *To be completed by bail agent applicant (Designated Bail Agent's should complete their own when applying for themselves)*

I hereby acknowledge that I have been provided and read a copy of ALL APPLICABLE COURTS' Policy Memorandum / Policy Directives Regarding Bail Bonds. I further understand that the provisions set forth in said Policy Memorandum / Policy Directives govern my conduct as a bail bond agent before the respective court. I agree to abide by all the provisions of said Policy Memorandum/Policy Directives and further agree to notify the Administrative Office of the Courts, in writing, as soon as practicable but in no event later than 10 business days of any changes to the information as set forth on this Bail Registration Form.	
Notarized Signature and Title of the Bail Agent	Printed Name of Applicant and Title
Sworn to and subscribed before me this _____ day of _____ , _____	
_____	_____
Notary Public	Date

**SECTION 4:** *To be completed by surety entity only*

**CERTIFICATION BY INSURANCE/SURETY COMPANY:**

I certify that the insurance/surety company listed in SECTION I is authorized and admitted to transact surety business by the Delaware Department of Insurance. The above named bail agent / designated bail agent is authorized to write bail bonds on behalf of that insurance company in Delaware and is licensed as an insurance producer by the Delaware Department of Insurance. I certify that the foregoing statements made on this Bail Registration form are true. I am aware that if any of the foregoing statements made on this form are willfully false, fictitious or fraudulent, I am subject to punishment or prosecution. I understand it is my obligation to update the information contained herein as changes occur in order to assure that the information remains complete and accurate.

\_\_\_\_\_  
Notarized Signature and Title of the Corporate Officer

\_\_\_\_\_  
Printed Name of Corporate Officer and Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

My Commission Expires:

Mail or hand-deliver the original registration form along with the original power of attorney and other required attachments, during normal business hours (8:30 a.m. to 4 p.m.) to **Bail Bond Registration, Filing and Payment Center (Attn: AOC Reception Desk), 500 N. King Street, Suite 1700, Wilmington, DE 19801-3704**

**SECTION 5:** *Checklist*

**If this form was completed by a Bail Entity, please make sure the following is complete:**

- The Business names listed on this document and Delaware Div. of Revenue Business License, Delaware Dept. of Insurance Business License, all municipality licenses exactly matches the business name on file with the Internal Revenue Service (IRS) as it appears on IRS form SS-4.
- If posting in Wilmington, attach a copy of the City of Wilmington Business License or receipt if prior to February 18<sup>th</sup>.
- If posting in Georgetown, attach a copy of the Town of Georgetown Business License
- If posting in the Dover, attach a copy of the City of Dover Business License.
- Surety Power of Attorney – New Castle
- Surety Power of Attorney – Sussex
- Surety Power of Attorney - Kent

**If this form was completed for a Bail Agent / Designated Bail Agent**

- Completed packet
- Power of attorney documents are attached for all Courts and Counties for which you are practicing
- The Business names listed on this document and Delaware Div. of Revenue Business License, Delaware Dept. of Insurance Business License, all municipality licenses exactly matches the business name on file with the Internal Revenue Service (IRS) as it appears on IRS form SS-4
- If you are a non-Delaware resident, provide a photocopy of your driver's license or governmental issued identification bearing a photo

## APPENDIX - Frequent Asked Questions, Reasons for Rejection and Samples

The following list several commonly occurring reasons for rejection and tips on how you can avoid them in your own packets.

### 1. DOI Certificate of Authority

The Delaware Department of Insurance Certificate of Authority (“Certificate”) is a one page document and it can be obtained from your surety company. This document grants the Surety Company the Authority to do business. The Certificate is renewed annually; you need to attach a copy of their most recent certificate to the Bail Entity registration submission. A blank copy of a Certificate is attached in order to familiarize you with what you are requesting from your surety.

Sample:



### îò Guarantor

The Guarantor as listed in Section 2 above applies to the Designated Bail Agent. This section should be completed by the Designated Bail Agent and not the Surety.

### îò Business Entity Name must match

The most frequently occurring reason for rejecting an application is that the Business Entity names do not match on all documentation. The documentation, being legal in nature, must match precisely to ensure that the business has the appropriate registration and insurance coverage needed to do business within the jurisdiction.

**TIP:** Refer to any official IRS paperwork (form SS-4) for a correct listing of your business name. All other documents should match your IRS paperwork.

### îò Municipality licensing

Another common reason for rejection is failure to provide a copy of your Business License from the Municipalities. Municipalities such as the City of Wilmington operate on a different renewal cycle from this registration process and therefore you may not be able to obtain a copy of the actual license prior to this registration process deadline. To account for that the Courts will temporarily allow you to submit the receipt for payment to the City of Wilmington to begin the application process. You will then need to submit your official license before January 31st.