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**WAIVER OF PRIVACY ACT/INFORMATION ACT/FAIR CREDIT REPORTING ACT
AND AUTHORIZATION FOR RELEASE OF INFORMATION AND/OR RECORDS**

TITLE 28 - FOIA Privacy Act – Freedom of Information Act (1966)

**TITLE 6 – Fair Credit Reporting Act; HIPPA – Health Insurance Portability and Accountability Act (1966); DPPA – Driver’s Privacy Protection Act (1994); GLBA – Gramm-Leach-Bliley Act: Right to Financial Privacy Act (1978) pursuant to
CORA – Colorado Open Records Act under C.R.S. § 24-72-201 through C.R.S. § 24-72-309**

I, _____ **print name** (hereinafter referred to as Defendant/Indemnitor) hereby waive any and all rights I may have under **TITLE 28 - FOIA Privacy Act – Freedom of Information Act (1966)**
**TITLE 6 – Fair Credit Reporting Act; HIPPA – Health Insurance Portability and Accountability Act (1966); DPPA – Driver’s Privacy Protection Act (1994); GLBA – Gramm-Leach-Bliley Act: Right to Financial Privacy Act (1978) pursuant to
CORA – Colorado Open Records Act under C.R.S. § 24-72-201 through C.R.S. § 24-72-309**, and any other such local, state or federal law and further irrevocable **CONSENTS** and **AUTHORIZES** without any reservation or protest that the Surety and/or its Producers, Agents, Successors or Assigns, and/or duly authorized representative(s) **to obtain any and all private and/or public information and/or records concerning the Defendant/Indemnitor** from any party or agency, private or governmental (local, State, or Federal), including but not limited to:

Internal Revenue Service, State Department of Disability Insurance, United States Armed Forces, United States Postal Service, Federal Banking Institutions, all Municipal, County, State, and Federal Law Enforcement Agencies, credit reporting agencies, credit reports, credit collection companies, Federal Social Security Administration records, public utilities (e.g. water, electric, gas, telephone, cell service, cable, etc.), telephone communication companies, cellular telephone providers, pager services, landlord/mortgage company records, criminal records, police/sheriff/jail mug shot, civil records, State Division of Motor Vehicles driving records, medical records, school records, worker’s compensation records, employment and/or unemployment records and any other person(s) or public, private or governmental organization(s) having private and/or public information and/or records concerning the Defendant/Indemnitor.

Defendant/Indemnitor **AUTHORIZES** without reservation or protest, any party, agency, private or governmental (Local, State, Federal), that is contacted by the Surety and/or its Producers, Agents, Successors or Assigns, **TO FURNISH ANY AND ALL PRIVATE AND/OR PUBLIC INFORMATION REQUESTED IN THEIR POSSESSION CONCERNING THE DEFENDANT/INDEMNITOR** to the Surety and/or its Producers, Agents, Successors or Assigns and direct that a copy of this document shall serve as evidence of said authorization in lieu of Subpoena for same.

AUTHORIZED BY: _____ **print name and signature**

SSN: _____ Date of Birth: _____

The foregoing legal instrument was acknowledged before me this _____ day of _____, 20_____

By: _____ RPB: #403601