

eBONDS ACCESS APPLICATION AND AGREEMENT

OMB No. 1653-XXXX
Exp. XX/XXXX

This application may be completed by an acceptable Surety Company (Surety). An acceptable Surety is one that appears on the current Treasury Department Circular 570 as a company holding the requisite certificate of authority to act as a Surety on federal bonds. This application is the preliminary step to gain access to the Department of Homeland Security electronic Bonds Online (eBONDS) to enable the Surety's agent(s) to post immigration bonds on behalf of the Surety. The Surety agrees to submit with this application an absolute power of attorney executed by its president and certified by its corporate secretary or other duly authorized corporate officers for each agent it proposes to authorize to post immigration bonds on its behalf using eBONDS. The Surety must also provide its authorized agents with Information Assurance Awareness Training prior to gaining access to the system. The scope of this training is to reinforce the importance of maintaining the confidentiality, integrity and availability of information of all types. The Surety will be liable for any breach of this application including breaches by its authorized agents. If a breach occurs, the Surety agrees to notify ICE immediately by emailing DHS Headquarters Bond Management Unit at ICEeBONDS@dhs.gov. Failure of the Surety to fully complete the application (including submission of required documents) shall result in its rejection of the application. DHS may refuse to accept this application to the extent permitted by law.

While eBONDS provides a means for legal recognition of electronic signatures and bond posting records, DHS reserves the authority to impose and modify guidance and rules to ensure the reliability, availability and integrity of immigration bonds and records or when necessary for other DHS purposes.

The continuing use of eBONDS by Surety or its attorneys-in-fact manifests its unqualified assent to be bound by all of the terms and conditions applicable to using eBONDS. By making this application, the Surety further agrees that the powers of attorney (POA) submitted as a part of this application will remain in full force and effect and may be accepted as the act and deed of the Surety until written notice to the contrary is received by the applicable Immigration and Customs Enforcement (ICE) Detention and Removal Operations (DRO) office(s) to which the attorney-in-fact is posting or has posted immigration bonds on behalf of the Surety. The Surety will have the responsibility via the eBonds system to stipulate how many bonds their agents can post. The Surety also agrees to maintain and disable agent's accounts and PKI certificates immediately if an agent resigns, is terminated or is found to have failed to comply with the terms of this application or to have misused the system. Users cannot use the system to amend ICE Form I-352: Immigration Bond. Amendments or attempts to amend the I-352 shall constitute a breach of this agreement and withdrawal of the privilege of using eBONDS. All acts of the Surety's attorneys-in-fact, including any irregularity, infirmity or unauthorized use of eBONDS by said agents, are the sole responsibility of the Surety. The Surety agrees to indemnify and hold harmless the United States from all loss or damage arising out its agents' actions in using eBONDS for posting immigration bonds on its behalf.

IF YOU DO NOT ACCEPT AND AGREE TO THE TERMS OF THIS APPLICATION, YOU MAY NOT ACCESS eBONDS OR USE ANY OF THE SERVICES PROVIDED ON OR THROUGH eBONDS.

This application must be completed in full.

The Surety must also submit with this application the following documents:

- Rules of Behavior signed by an appropriate officer of the Surety and each attorney-in-fact acknowledging and agreeing to comply with all of said rules.
- Executed Powers of Attorney (POA) for each agent empowered to post bonds on behalf of the Surety including specific authority to post bonds using the eBONDS system.
- A Public Key Infrastructure (PKI) certificate for authentication purpose
- A copy of the Surety's last annual report to the Secretary of State or other state entity licensing sureties in the state of the Surety's licensure.
- A certified copy of the corporate resolution(s) authorizing the execution of this application and authorization for the execution of each POA submitted with this application.
- Certification that each agent has satisfactorily completed Information Assurance Awareness Training. Training materials can be obtained by contacting ICE Headquarters Bond Management Unit at ICEeBONDS@dhs.gov or by calling the ICE Help Desk at **(888) 347-7762**.

eBONDS Access Agreement

The Surety hereby makes application for access to eBONDS subject to the above and foregoing requirements and conditions which Surety accepts and agrees to perform.

A . Surety Company Information

Name of Surety: _____

Street Address of Surety: _____

Mailing address of Surety: _____

City, State and Zip Code: _____

Telephone: _____

Email address of Main Contact: _____

Surety TIN(Taxpayer Identification Number): _____

Please list all the U.S. States and Territories in which the Surety is authorized to post immigration bonds:

Check here if Surety is authorized to post immigrations in all U.S. States & Territories

B. Agent(s) authorized as an attorney-in-fact to post bonds on behalf of the Surety Company

Agent 1.

Name of Agent Supervised by Surety: _____

Street Address of Agent: _____

Mailing Address of Agent: _____

City, State and Zip Code: _____

Telephone: _____ Email: _____

Agent or Producer Number (Surety Issued): _____

Agent State License Number: _____

Agent's SS# or EIN #: _____

Agent 2.

Name of Agent Supervised by Surety: _____

Street Address of Agent: _____

Mailing Address of Agent: _____

City, State and Zip Code: _____

Telephone: _____ Email: _____

Agent or Producer Number (Surety Issued): _____

Agent State License Number: _____

Agent's SS# or EIN #: _____

Agent 3.

Name of Agent Supervised by Surety: _____

Street Address of Agent: _____

Mailing Address of Agent: _____

City, State and Zip Code: _____

Telephone: _____ Email: _____

Agent or Producer Number (Surety Issued): _____

Agent State License Number: _____

Agent's SS# or EIN #: _____

*** Please list additional agent(s) using Appendix A**

C. Privacy Statement

Authority and Purpose: DHS is collecting your information to determine whether to grant you access privileges to eBONDS, a DHS information system administered by U.S. Immigration and Customs Enforcement (ICE), and to maintain accurate records about the surety companies and their agents that have been granted access to eBONDS. DHS is also collecting this information in accordance with the Immigration and Nationality Act, as amended, (8 U.S.C. 1103, 1183, 1226, 1229c, and 1363), to provide for the posting of an immigration surety bond, and for associated financial management activities, including collection of unpaid monies, reimbursement of the bond principal, and the calculation, payment, and reporting of interest.

Disclosure: Furnishing this information is voluntary; however, failure to provide it will result in the denial of access to eBONDS.

Routine Uses: This information will be used by and disclosed to DHS personnel and contractors or other agents who need the information to support the enforcement of immigration laws and the provision of immigration benefits. DHS may share this information with the U.S. Treasury Department to report interest paid to an obligor, and to facilitate payments to or collection of monies owed by an obligor. DHS may also share this information with the U.S. Justice Department and other Federal and State agencies for collection, enforcement, investigatory, or litigation purposes, or as otherwise authorized pursuant to its published Privacy Act system of records notice.

D. Public Reporting Burden

U.S. Immigration and Customs Enforcement is collecting this information as a part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the data needed and completing and reviewing this collection of information is 15 minutes (.25 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to, an information collection unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

Department of Homeland Security
U.S. Immigration and Customs Enforcement
500 12th Street, S.W., Room 3138, Washington, D.C. 20536
(Do not mail your completed application to this address.)

E. Application Check List

Please ensure you have included the following items to be included in your application package

- Signed and dated Rules of Behavior
- Executed Powers of Attorney for each agent empowered to post bonds on behalf of the surety company
- A Public Key Infrastructure (PKI) certificate for authentication purpose
- A copy of the Surety's last annual report to the Secretary of State
- A certified copy of the corporate resolution(s) authorizing each named attorney in fact to post bonds
- Certification that each agent has satisfactorily completed Information Assurance Awareness Training

31 U.S.C. 7701(c)(1) requires each person doing business with a federal government agency to furnish that agency such person's taxpayer identification number. It is the intent of the DHS to use such numbers for collecting and reporting information on any delinquent accounts arising out of such person's relationship with the Government. The obligor, surety, or agent must furnish its Taxpayer Identification Number (TIN) to DHS. Failure to furnish the TIN may result in a refusal of the bond.

Surety hereby certifies that the information contained in this application and the documents submitted with this application are true and complete. I understand that false information and/or inappropriate use of eBONDS as stated in the Rules of Behavior may be grounds for immediate termination of the corporation's eBONDS access and subject to appropriate legal action. The Surety Company authorizes DHS to verify any or all information listed above.

In Witness Whereof the Surety has caused this application to be signed by its President and attested by its Secretary to be the act and deed of the Surety on this _____ day of _____, _____

(Name of Surety)

by:

(Signature of President)

**ATTEST:
(Affix corporate seal)**

The undersigned hereby certifies that he is the _____ Secretary of _____, corporation organized and existing under the laws of the State of _____; that the above named President has been authorized to execute the foregoing Application on behalf of the Corporation; and that the Application for Access to eBONDS is the act and deed of the corporation;

(Signature of Corporate Secretary)

The State of _____

County of _____

The persons whose signatures appear above personally appeared before the undersigned, a Notary Public in and for the above named County and State, on the day and date above named, and acknowledged the execution of the foregoing instrument to be the voluntary act and deed of the applicant Corporation therein named and for the purpose therein set forth, that they are duly authorized to execute the foregoing instrument, and that the statements and representations therein contained are true and correct to the best of their knowledge and belief.

Notary Signature

(Affix Notary Seal)

Notary Public in and for

The State of _____

County of _____