

\$20.00 NON-REFUNDABLE APPLICATION FEE

APPLICATION FOR CRIMINAL BAD CHECK ARREST WARRANT
PLEASE PRINT APPLICATION

I, _____
Business name & agent name Address Phone

DO HEREBY FILE THIS APPLICATION FOR A WARRANT AGAINST:

NAME ADDRESS PHONE
AGE: _____ SEX: _____ RACE: _____ WEIGHT: _____ HEIGHT: _____ HAIR: _____ DOB: _____
EYE COLOR _____ DL# _____ SS# _____

ORIGINAL CHECK, ENVELOPE AND COPY OF 10-DAY DEMAND LETTER ARE ATTACHED.

Date check was given to Victim : m /d /y CK# \$

Is the date on the check different from date it was given to victim? Yes No

Address where victim received check _____

Yes No

- Is returned letter attached?
- Is certified letter receipt (green card) attached?
- The address on the "10-day letter" envelope and on the check are **EXACTLY** the same.
If not, why not? _____
- Was the check presented to bank within 30 days of your receipt?
- Was identification produced and documented on check?
- Was this check given for: Rent [], Wages [], State taxes [], Child Support [], Loan [],
Account [], Debt [], Cash [],
Merchandise [] What kind? _____
Services [] What kind? _____
Other [] Describe? _____
- Did the victim give the merchandise, services, etc., at the same time check was given?
If no, when were services, merchandise, etc., given? _____
Date you sent certified or registered letter? _____
- Was this within 90 days of the date the check was returned to you? Yes No
- Was there any response from maker of check when contacted about check Yes No
- Did you accept a replacement check or payment?
- Did clerk initial check? Yes No
- Did the person who passed the check do any of the of following in the presence of the person who accepted the check?
(A) Date check Yes No (B) Sign check Yes No
- Why was the check returned to the victim? Insufficient funds [], No account [], Account closed [],
Stop payment [], Other [] Needs bank clarification _____

At customer's request, the check was held for: No request [], 0-1 day [], 2-3 days [],
3 or more days []

Sworn to and subscribed before me
this _____ Day of _____, _____

Signature of Applicant

I certify that probable cause does/does not
exist for the issuance of this warrant.

MAGISTRATE