SENECA INSURANCE COMPANY, INC. 157 Main Street, Greenville, PA 16125 P.O. Box 806, Greenville, PA 16125 (800) 245-0366 I FAX (724) 588-8801 Email: CourtNotices@cfins.com		
	(AG	ENT'S STAMP)
AUTHORIZATION TO ARREST DEFENDANT ON BAIL BOND		
KNOW ALL MEN	I BY THESE PRESENTS:	
That we,	(BAIL AGENT)	, do hereby authorize and (STATE LICENSE #)
empower		
as its representative and in its stead, to lawfully arrest and detain		
he/she may be found in the UNITED STATES OF AMERICA, pursuant to any applicable laws of any sovereign state, and		
to hold said defendant in custody and surrender said defendant to the		
Court,		City of Judicial District County of
, State of,		
wherein proceedings are now pending against said defendant described in said Bail Bond.		
		day of ,
This authorization must be accompanied by a certified copy of bail bond and, where applicable, copy of arrest warrant.		
	day of,	
at		
		By BAIL AGENT SIGNATURE
STATE OF	ر ا	
	}	• SS.
On	-	before me
personally appeared, personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s) or the entity upon behalf of which the person(s) acted executed the instrument. Witness my hand and official seal.		
	Notary Public	My commission expires: