

Under The Rose Investigations 13636 Ventura Boulevard, #190 Sherman Oaks, CA, 91403 818-207-6733



1299private.eye@gmail.com

Device Number:	Install Date:		
LEASE AGREEMENT This Lease Agreement (hereinafter "Lease Under The Rose Investigations The Bail Bond Agency, Agent agreed to be tracked by electronic monitoring equipment. U Defendant have agreed to the terms of this Lease Agreement	and, Defendant is e nder The Rose Investigations The I	either required to be or has	
EQUIPMENT DESCRIPTION: Ankle Monitor Monthly payments of \$ are payable on the of each month.	LESSEE'S RECURRING PAYMENT: LESSEE'S PAYMENT AT SIGNING O Monitoring Fees: Insurance: Deposit (Refundable)	F THIS AGREEMENT \$ \$ \$ \$	
I hereby agree for my credit card to be charged the Monthly fee of \$ until discharged by courts. NOTE: Using an electronic monitoring device is a condition of your bond/release/sentencing. Failure to comply may result in your re-arrest. All payments are FINAL. There are no refunds for monitoring payments.	Total Monthly Monitoring Fees: Install Fee: Un-Install Fee Total: *Payment Terms - ** Lease Agree	\$150.00 \$150.00 \$ment Addendum	
Terms of monitoring: TO BE WORN AND M	ONITORED UNTIL COURT CASE IS COM	IPLETED.	
Bail AmountCase #	Charge		
Bail Agency: Court:	Booking #:		
Lessor: Under The Rose Investigations The Bail Bond Agenc	y, 13636 Ventura Blvd., #190, Sherm	nan Oaks, CA 91423	
(818) 207-6733.			
Defendant:	D.O.B.:		
Soc Sec #: Phone #: _			
Address:Cit	City, State, ZIP		
Indemnitor:D.	O.B.:		
	none #:		
	ry, State, ZIP		
The Defendant and/or Indemn of his/her release, which requires wearing a monitoring devic sentencing. The Defendant/Indemnitor is responsible for all fe Agency. All fees must be paid in full on date of installation. Fa fees in full on the required date(s) is a breach of the terms an to pay the required monitoring fees can lead to your bond be arrested and returned to custody.	nitore for the Bail Bond Agency and or Co ees incurred by Under The Rose Inve ailure of the Defendant/Indemnitor to d conditions of the bail bond release	understand the condition(s) ourt for pre-trial or estigations The Bail Bond to pay the monitoring service a and or court order. Failure	

Defendant Signature:	Indemnitor Signature:
month and all billing is on the anniver automatically charged on the day of e wearing / utilizing any device from Ur	The Rose Investigations The Bail Bond Agency requires payment in advance for easary date from the installation with a proration for the 1st month. Payments will be ach anniversary date from the date of the initial activation date. Further, Defendant be der The Rose Investigations The Bail Bond Agency gives their expressed and or implies immediately charge to the Defendant's account all funds due per the terms of this

AUTHORIZATION TO CHARGE CREDIT CARD

(PLEASE PRINT ALL INFORMATION CLEARLY AND LEGIBLY BELOW)

Card Type (che	eck one): O Visa / O MC / O Disc / O AmEx Card #:	
Expiration Dat	se : Security Code / CVV (3 Digits / 4-Amex):	
Cardholder Na	ime	
Address (billing	g address)City/St/Zip	
	itted to maintaining your privacy as the Cardholder. I understand that a credit card processing fee of 3% will the credit card processing company.	
Cardholder Sig	gnature: Lessee's Acknowledgement:	
	(If not cardholder)	
Schedule of Fe	ees: YOU WILL BE CHARGED THESE FEES for services and violations.	
\$150.00	Install Fee	
\$150.00	Un-Install Fee	
\$25.00	Per request – if staff of Under The Rose Investigations The Bail Bond Agency is requested/required to wait at a detention Center/jail/station/bail agency/etc., this fee will apply.	
\$275	Monthly Fee	
\$50.00	Insurance Fee	
\$250.00	Deposit Fee (refundable)	
\$200.00	Non-compliance requiring action by Under The Rose Investigations The Bail Bond Agency, staff, plus \$.55 per mile (reinstallation costs, strap replacement, over-charging)	
\$1,000.00	Tampering, disabling, or damaging this device will result in a charge of \$1,000.00. Charger replacement is \$60.00	
\$250.00	Recovery of any equipment requiring a physical response including damaging, disabling or removing device.	

By signing this lease agreement, the defendant and/or Indemnitor has agreed to pay the above listed fees, service charges, and any violation fees immediately upon notification by Under The Rose Investigations | The Bail Bond Agency. Any failure to do so constitutes breach of contract and will be reported to courts, probation officer, etc.

Violation of any of these terms below will constitute a breach of contract and will result in the defendant being remanded back into custody (surrender). I am restricted to be within the following geographical areas only:

- Defendant may not be within 500 feet of any airport.
- Defendant may not travel outside of California

- Defendant may not travel within 50 miles of the Mexico/Nevada/Arizona/Washington/Canadian border.
- Defendant must contact Under The Rose Investigations | The Bail Bond Agency if he/she will be traveling outside of the county of dwelling.
- Defendant must have a current form of communication on file with Under The Rose Investigations | The Bail Bond Agency.
- Breach in this contract will result in surrender.

CHARGING: You are required to charge the battery for 30 minutes, twice a day (morning and night. **UNINTERRUPTED. Failing to charge the device is considered a violation of this agreement.** Charging: Connect the provided cable to the device AC adapter and a red or yellow light will flash. Connect the free end of the breakaway cable to the power jack on the front of the device. A green light will remain solid once the device is fully charged. To take the charger off, pull the clips apart.

** If at any time the device vibrates, immediately place device on the charger. IF the device continues to vibrate after being placed on the charger, immediately contact Under The Rose Investigations | The Bail Bond Agency, Agent Deedra Alvarado 818-207-6733.

WATERPROOF: This device is waterproof. However, you should shower rather than bathe while wearing the ankle monitor. DO NOT swim or hot tub.

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ELECTRONIC MONITORING PROGRAM AGREEMENT

Name/I	ame/DOB: Unit #:					
The following rules apply to the Global Positioning Satellite System (GPS). Failure to comply with the following conditions would constitute a violation of your supervised release and subject to possible revocation. You must initial each condition listed below:						
	I understand effective, my bail agreement with					
	I understand that I will not be allowed to travel outside of California without permission of (Bail Company) l. I will not travel outside of the country and not near any airports or country border towns.					
	I understand that I am responsible for the maintenance and security of the monitoring equipment. If the equipment is damaged or stolen due to my negligence, I will be held liable for the cost of repair or replacement of the equipment. The replacement cost for the GPS Unit is \$1,000.00.					
	I understand any damage to the equipment may result in formal charges being filed against me.					
	I will not disconnect, move, or tamper with the GPS monitoring equipment in any manner.					
	I will charge my GPS monitoring equipment for a minimum of 30 minutes, twice a day. (Morning and Night).					
	I will allow Under The Rose Investigations or an agent of the Bail Bond Company inspection of the equipment on request.					
	I understand that all movement will be tracked and stored as an official record of Under The Rose Investigations but can be discoverable by court if subpoenaed.					
	I understand that I am prohibited from wearing the GPS monitor device in water, pools, bath tubs, and hot tubs, showers are okay as long as the device is covered with plastic.					
	I agree to return all monitoring equipment as i	instructed upon our request.				
	I understand that in the event of an emergency, I am to contact Under The Rose Investigations, Deedra Alvarado 818-207-6733 immediately.					
	1	WARNING!!!				
Violations of this agreement may result in forfeiture of bail bond and arrest.						
I have read, acknowledged with initials and understand what is expected of me. I agree to follow the conditions outlined above and further understand that the amount of time I remain on this program is based on my compliance with Bail Bond and/or Conditions of Release.						
My signature confirms the above, as well as my receipt of the Electronic Monitoring Equipment.						
Defend	lant Signature:	Print Name:	Date:			
Indemnitor Signature:Print Name:Date:						

EMT Signature:		Date:	
C	Under The Rose Investigations The Bail Bond	_	
	Agency, Deedra Alvarado, Agent		