# TCIC Conditions of Bond Data Form

*This form is to be completed by the issuing court and shared with a local law enforcement agency for entry.*

|  |  |
| --- | --- |
| Court ORI: | Court Descriptor: |
| OCA: | Choose One:New Conditions of Bond Entry Modify Existing Conditions of Bond Entry |
| Issue Date: | Date of Expiration: | Date Signed: Date Rescinded: |

**Complete all fields to ensure timely entry into TCIC. Missing information will delay this entry and will require the entering agency to contact the court to provide the necessary information.**

|  |  |
| --- | --- |
| Respondent Name**:** | Sex:Male Female Unknown |
| Race: (circle one):Indian Asian Black White Unknown | Ethnicity: (circle one)Hispanic Non-Hispanic Unknown |
| Place of Birth: | Citizenship: | Date of Birth: | Height: | Weight: |
| Skin Tone: (circle one):Albino Black Dark Dk Brown Fair Light Lt Brown Medium Med Brown Olive Ruddy Sallow Yellow |
| Eye Color: (circle one):Black Blue Brown Gray Green Hazel Maroon Pink Multi-Colored Unknown |
| Hair Color: (circle one)Black Blond Brown Gray Red White Sandy Bald Blue Green Orange Pink Purple Unknown |
| Scars, Marks and/or Tattoos: (please describe in detail)AKAs: |
| Caution and Medical Conditions: (circle all that apply)00 – Armed and Dangerous 05—Violent Tendencies 10—Martial Arts Expert 15—Explosive Expertise40-Int’l Flight 20—Known to Abuse Drugs 25—Escape Risk 30—Sexually Violent Predator50—Heart Condition Risk 55—Alcoholic 60—Allergies 65—Epilepsy70—Suicidal 80—Medication Required 85—Hemophiliac 90—Diabetic 01--Other |
| Respondent Address: |
| City: | County: | State: | Zip: |
| Bond Conditions: (circle all that apply) |
| 01 | Ignition Interlock Device |
| 02 | GPS Monitor |  |
| 03 | Alcohol Monitor |  |
| 04 | Curfew (See MIS) |
| 05 | Home Confinement |
| 06 | No Communication with Protected Person |  |
| 07 | Prohibited from Protected Person/ Child Residence, School, Employment, Business, Day-Care Facility (See MIS) |
| 08 | Supervised Access to Protected Person |
| 09 | No Family Violence or Assault  |  |
| 10 | No Direct of Indirect Threatening or Harassment of Victim or Family or Pets |  |
| 11 | No Contact Except through Attorney or Court-Appointed Person |  |
| 12 | No Firearm Possession |  |
| 13 | Stay Away (See MIS) |  |
| 14 | Other (See MIS) |  |
|  Bond Type: (circle one) | Bond Amount: |
| C | Cash Bond | S | Surety Bond | P | Property Bond |
| Bond Condition Remarks: |
| Brady Record Indicator (BRD): SVC:(circle one) served/not served/unknown N—Respondent is NOT disqualified Y—Respondent is disqualified U—Unknown SVD: |
| Relationship to Protected Person: (Not the additional PPNS) |

*Please include the following numeric identifiers, if available:*

|  |  |  |
| --- | --- | --- |
| Driver License: | DL State: | DL Expiration: |
| Texas ID: | Miscellaneous ID: | Social Security: |

# TCIC Conditions of Bond Data Form– Page 2

Respondent Name:

*Respondent Vehicle Data:*

|  |  |  |  |
| --- | --- | --- | --- |
| License Plate: | LP State: | LP Year: | LP Type: |
| Vehicle ID: | Year: | Color: |
| Make: | Model: | Style: |

*Protected Person Data*

|  |  |  |
| --- | --- | --- |
| Protected Person Name: | Sex:Male | Female |
| Race: (circle one):Indian Asian | Black | White | Unknown |  |  | Ethnicity: (circle one)Hispanic Non-Hispanic Unknown |
| Date of Birth: | Social Security: |
| Protected Person Address: |
| City: | County: | State: | Zip: |

*Protected Person Employer Data*

|  |  |
| --- | --- |
| Protected Person Employer Name: | Address: |
| City: | State: | Zip: |
| Protected Person Employer Name: | Address: |
| City: | State: | Zip: |

*To be completed by Criminal Justice/Law Enforcement Official:*

|  |  |  |  |
| --- | --- | --- | --- |
| SID: | FBI #: | FPC: | MNU: |