

**Robinson Bonding Co.**  
**3842 Leeds Avenue**  
**North Charleston, SC 29405**  
**(843) 747-8888**

**ELECTRONIC MONITORING LEASE AGREEMENT**

I, \_\_\_\_\_ hereby lease the following electronic monitoring equipment from Robinson Bonding CO. STOP GPS Monitor serial Number: \_\_\_\_\_ and charger.

*I fully understand that this equipment must promptly return to Robinson Bonding Co., 3842 Leeds Avenue, North Charleston, SC 29405 upon demand at any location specified by the bondsman. Failure to return this rental property when requested will result in criminal charges. South Caroline Code of laws 16-13-0420(A) states that it is illegal not to return rented objects or to obtain rented objects under false pretenses, and the lease could face fines or imprisonment or both.*

*I fully understand that if any if the rented equipment is damaged I am fully responsible for all repair and/or replacement costs. Failure to promptly remit payment for damages will result in criminal charges for Damage to Personal Property under South Carolina Code of Laws 16-11-0510(B) (3). The fee for any damage to the monitor itself or bracelet is \$500.00. The fee for any damage to the charger is \$25.00.*

*I understand that in signing this lease agreement I must pay \$130.00 biweekly or \$260.0 monthly, and must be paid in advance at all times.*

*I understand that failure to make such payment will result in the immediate demand for return of the rental equipment under this lease. Should the electronic monitoring device be removed for non-payment the Bail Bondsman, the Solicitor and the appropriate court will be notified that the defendant is in violation of his/her bond and may be returned to jail as a result.*

*I agree to pay the required set-p fee of \$100.00 plus \$65.00 for the first week at the time of execution f this rental agreement. I further agree if through any fault of my own or the defendant an agent must come io my location to service, repair, or replace the electronic monitoring equipment, I will be responsible to pay the agent a \$60.00 service fee at the time of service.*

*The Defendant must call (843) 747-3888 at least 24 hours in advance for any routine appointments he is permitted to attend under his/her court order. Emergencies may be called in at any time day or night.*

*I fully understand that I, the Lease, or the Defendant must be available at all times by telephone should an issue arise. If we cannot make contact with the Defendant, the Bail Bondsman, the Solicitor and the appropriate court will be notified. I further understand that should, I, the Lease, or Defendant change his/her phone number I am responsible for notifying immediately!*

### ***Leasee Information***

\_\_\_\_\_  
*Leasee Name*

\_\_\_\_\_  
*Leasee Address*

\_\_\_\_\_  
*Leasee SSN*

\_\_\_\_\_  
*Leasee DOB*

\_\_\_\_\_  
*ID/DL Number & State*

\_\_\_\_\_  
*Leasee Home / Cell Number*

\_\_\_\_\_  
*Leasee Work Number*

\_\_\_\_\_  
*Leasee Signature*

\_\_\_\_\_  
*Date*

### ***Defendant Information***

\_\_\_\_\_  
*Defendant Name*

\_\_\_\_\_  
*Defendant Address*

\_\_\_\_\_  
*Def. SSN*

\_\_\_\_\_  
*Def. DOB*

\_\_\_\_\_  
*ID/DL Number & State*

\_\_\_\_\_  
*Defendant Home / Cell Number*

\_\_\_\_\_  
*Defendant Work Number*

\_\_\_\_\_  
*Defendant Signature*

\_\_\_\_\_  
*Date*

### ***References***