

Brazoria County Courthouse Attorney Access Card Application



Completed applications may be submitted by emailing to CH.Security@brazoriacountytx.gov. Applicants will receive email confirmation upon receipt of completed applications. Applicants must be licensed to practice law in the State of Texas, in good standing with the State Bar of Texas, and a member of a Bar Association based in Brazoria County. Applicants must pay a non-refundable fee of \$50 for new or renewed cards. A \$15 charge must be paid for replacement cards. Once an eligibility determination is made, the Brazoria County Sheriff's Office Court Security Unit will notify the applicant.

This application is for:		
☐ New Access Card ☐ Renewal of Acces	ss Card □ Replacement Card (Lost	or Stolen)
If application is for a replacement card, plea	ase explain how card was misplaced:	
Firm/Employer:		
Last Name:	First Name:	Middle Init.:
Date of Birth (mm/dd/yyyy):	Race:	Sex:
Office Address:		
City: State:	Zip: County:	
Driver's License #: Bai	r Card #:	
Texas Concealed Handgun License #:		
Office Phone #:	Cell Phone #:	
Email Address:		
Do you have any prior criminal convictions (charges, or past or active protective orders?	1 1	pending criminal
If "Yes," explain:		



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"l,	(App	olicant Name), have received a copy and	d agree
to terms of the Brazoria		rney Access Card Policy. I agree and con	_
		oria County Sheriff's Office for the pur	
determining whether I ar	n eligible to participate i	n the Attorney Access Card Program. I a	gree to
immediately inform the	Brazoria County Sheriff'	's Office Court Security Unit in the eve	ent any
information in this applic	ation changes or in the e	vent that an Attorney Access Card issue	d to me
is lost or stolen."			
		Signature of Applicant	
Sworn and subscr	ibed to me by the said A	pplicant on this the day of	
20			
My Commission Expires:			
		Licensed Notary Public or Tex	as
		Peace Officer	
		Printed Name	