



550 Hulet Drive, Suite 105
Bloomfield Hills, MI 48302

Toll Free: 1-800-366-8279
Email: info@notarybonding.com

Fax: 1-800-637-5992
Website: notarybonding.com

Notary Service and Bonding Agency, Inc. Order Form:


Economy

Michigan New or Renewal Notary Bond Only Package "A"

\$ 25.00

Package Includes:

- \$10,000 Notary Public 6-7 Year Bond.



Standard

Michigan New or Renewal Notary Bond Package "B"

\$ 59.00

Package Includes:

- \$10,000 Notary Public 6-7 Year Bond.
- **\$10,000** Notary Errors & Omissions 6-7 Year Insurance Policy.
- Self-Inking Rectangular Commission Expiration Date Stamp (5,000 Impressions).



JOHN H. DOE
Notary Public, State of Michigan
County of Oakland
My Commission Expires Mar. 27, 2027
Acting in the County of _____

Deluxe

Michigan New or Renewal Notary Bond Package "C"

\$ 89.00

Package Includes:

- \$10,000 Notary Public 6-7 Year Bond.
- **\$20,000** Notary Errors & Omissions 6-7 Year Insurance Policy.
- Self-Inking Rectangular Commission Expiration Date Stamp (5,000 Impressions).



JOHN H. DOE
Notary Public, State of Michigan
County of Oakland
My Commission Expires Mar. 27, 2027
Acting in the County of _____

Elite

Michigan New or Renewal Notary Bond Package "D"

\$ 109.00

Package Includes:

- \$10,000 Notary Public 6-7 Year Bond.
- **\$35,000** Notary Errors & Omissions 6-7 Year Insurance Policy.
- Self-Inking Rectangular Commission Expiration Date Stamp (5,000 Impressions).



JOHN H. DOE
Notary Public, State of Michigan
County of Oakland
My Commission Expires Mar. 27, 2027
Acting in the County of _____

Select Your New or Renewal Michigan Notary Bond Package:

Economy	Notary Bond Only Package "A"	<input type="checkbox"/>	\$ 25.00
Standard	Notary Bond Package "B"	<input type="checkbox"/>	\$ 59.00
Deluxe	Notary Bond Package "C"	<input type="checkbox"/>	\$ 89.00
Elite	Notary Bond Package "D"	<input type="checkbox"/>	\$ 109.00

Required Information:

Commission name as it will appear on the documents you notarize: _____

Date of Birth: _____

Email: _____

Daytime Phone: _____

New Notary

Renewal Notary - Commission Expiration Date: _____

Residential Address: _____

Residential City: _____

Residential State: _____ Residential Zip Code: _____

Residence County: _____

Ship To Address: _____

Ship To City: _____

Ship To State: _____ Ship To Zip Code: _____

**If Non-Resident of Michigan provide business address information:*

**Business Name:* _____

**Business Address:* _____

**Business City:* _____

**Business State:* _____ **Business Zip Code:* _____

**Business County:* _____

Optional Express New or Renewal Michigan Notary Bond Service:

Receive your required \$10,000 notary bond and E&O insurance policy (if ordered) via email within 24 hours of us receiving your order. Other package items (if ordered) will be shipped separately. Excludes weekends and holidays.

Express Michigan Notary Bond Service **\$ 15.00**

Additional Notary Errors & Omissions 6-7 Year Insurance Policy:

\$10,000 Notary E&O 6-7 Year Insurance Policy **\$ 50.00**

Official Notary Public Recording Journals:

White Soft Cover (140 Entries) #999	<input type="checkbox"/>	\$ 7.00
Statue of Liberty Image Soft Cover (140 Entries) #303-A	<input type="checkbox"/>	\$ 14.00
Rocky Mountains Image Soft Cover (140 Entries) #303-B	<input type="checkbox"/>	\$ 14.00
Tropical Beach Image Soft Cover (140 Entries) #303-C	<input type="checkbox"/>	\$ 14.00
Pink Soft Cover (284 Entries) #304-B	<input type="checkbox"/>	\$ 18.00
Black Leather Hard Cover (400 Entries) #304-C	<input type="checkbox"/>	\$ 25.00

Additional Rectangular Commission Expiration Date Stamps:

Rubber (Requires Stamp Pad) #204-A	<input type="checkbox"/>	\$ 15.95
Self-Inking (5,000 Impressions) #205-A	<input type="checkbox"/>	\$ 18.95
Shiny Self-Inking - Black Case (5,000 Imp.) #205-1S B	<input type="checkbox"/>	\$ 21.95
Shiny Self-Inking - Green Case (5,000 Imp.) #205-1S G	<input type="checkbox"/>	\$ 21.95
Shiny Self-Inking - Orange Case (5,000 Imp.) #205-1S O	<input type="checkbox"/>	\$ 21.95
Shiny Self-Inking - Purple Case (5,000 Imp.) #205-1S P	<input type="checkbox"/>	\$ 21.95
Pre-Inked Slim Pocket (25,000 Impressions) #207-A	<input type="checkbox"/>	\$ 21.95
Pre-Inked (25,000 Impressions) #206-A	<input type="checkbox"/>	\$ 23.95
Xstamper (50,000 Impressions) #206-1S	<input type="checkbox"/>	\$ 29.95

Additional Notary Impression Seal Embossers:

  Example image shown is with an impression seal inker applied for faxing or photocopying. Use the seal embosser in conjunction with the commission expiration date stamp.

Embosser (Hand Held / Chrome-Plated) #200	<input type="checkbox"/>	\$ 22.00
Embosser (Desk Top / Black Matte) #201	<input type="checkbox"/>	\$ 29.00
Embosser (Hand Held / Solid Steel) #198-S	<input type="checkbox"/>	\$ 31.00
Embosser (Desk Top / <input type="checkbox"/> Brass <input type="checkbox"/> Pebble Grey) #199	<input type="checkbox"/>	\$ 34.00
Embosser (Desk Top / Solid Steel) #197-S	<input type="checkbox"/>	\$ 36.00

Select Your Payment Option:

Indicate Entire Check or Money Order Number: _____

Payable to: **Notary Service and Bonding Agency, Inc.**

OR

Charge Credit Card: Visa MasterCard AMEX Discover

Credit Card Number: _____

Credit Card Expiration Date: _____

X _____

Signature of Cardholder (Required for Credit Card Purchases)

Select Your Shipping Method:

Standard Shipping & Handling:	<input type="checkbox"/>	\$ 5.95
*FedEx Ground - 1 to 5 business days:	<input type="checkbox"/>	\$ 13.95
*FedEx 3 Day - 3 business days:	<input type="checkbox"/>	\$ 17.95
*FedEx 2 Day - 2 business days:	<input type="checkbox"/>	\$ 18.95
*UPS Next Day - 1 business day:	<input type="checkbox"/>	\$ 34.95

*FedEx & UPS Shipping options above are **ONLY** for notary stamp(s) and/or notary seal(s). All other products if ordered will be shipped Standard mail. Allow 2 to 5 business days for your notary stamp(s) and/or notary seal(s) to be personalized and manufactured prior to shipping based on the stamp/seal model. Note: Weekends and holidays are not a business day. Delivery time is based on distance to the destination.

Your Order Total:


Grand Total Amount: \$ _____

Avoid delays in processing!

Important requirements and instructions on how to complete the application for Michigan notary public commission.

Important: Please type or print legibly on the application for Michigan notary public commission. Be advised that all fields must be completed.

Important: DO NOT send your \$10.00 processing fee. You will be required to send that processing fee when you file your notary bond with the county clerk's office.

County Seal	 MICHIGAN DEPARTMENT OF STATE OFFICE OF THE GREAT SEAL	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th colspan="2">For County Use Only</th></tr> <tr><td>County name</td><td></td></tr> <tr><td>Date of oath and bond</td><td></td></tr> <tr><td>Oath administered by, and bond filed with:</td><td><input type="checkbox"/> Attorney (oath only)</td></tr> <tr><td></td><td style="text-align: right;">(Clerk's initials)</td></tr> </table>	For County Use Only		County name		Date of oath and bond		Oath administered by, and bond filed with:	<input type="checkbox"/> Attorney (oath only)		(Clerk's initials)
For County Use Only												
County name												
Date of oath and bond												
Oath administered by, and bond filed with:	<input type="checkbox"/> Attorney (oath only)											
	(Clerk's initials)											
APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION <small>(Please print legible or type; ALL fields must be completed or application will be returned)</small>												
1. Full Name (first/middle/last): <small>(must match your State driver's license or ID card)</small>												
2. Please indicate any previous and/or alias names: <small>If none, please check box <input type="checkbox"/> N/A</small>												
3. Driver's license or personal identification card number:	Issuing state:											
4. Residence address: <small>(Must match license or ID file - include PO boxes, lot and Apt numbers)</small>	City:	State: Zip:										
5. Date of birth:	6. E-mail address: <small>If none, please check box <input type="checkbox"/> N/A</small>											
7. Business Street address: <small>If none, please check box <input type="checkbox"/> N/A</small>	City:	State: Zip:										
8. If you are a licensed attorney in Michigan, enter your State Bar number: P- <small>If you are not a licensed attorney please check box <input type="checkbox"/> N/A</small>												
9. Michigan resident - County of residence:	Non-Michigan resident - County of employment:											
10. Residence Telephone numbers: <small>If none, please check box <input type="checkbox"/> N/A</small>	Business Telephone number: <small>If none, please check box <input type="checkbox"/> N/A</small>											
11. Please describe date and circumstance of any felony or misdemeanor convictions during the previous ten years in this or any other State. Attach additional pages if necessary. <small>If none, please check box <input type="checkbox"/> N/A</small>												
12. Do you currently hold or have ever held a notary public commission in this or any other state? Yes <input type="checkbox"/> or No <input type="checkbox"/> <small>If yes, indicate State: Michigan <input type="checkbox"/> or State of _____ and date _____ or Unknown <input type="checkbox"/></small>												
13. Have you ever had a notary public appointment in this or any other state? <input type="checkbox"/> revoked, <input type="checkbox"/> suspended, <input type="checkbox"/> cancelled, <input type="checkbox"/> Does not apply to me. If yes, please explain. Attach additional pages if necessary.												
<p>I hereby certify that I am 18 years of age or older, a resident of Michigan or maintain a principal place of business in Michigan; am a U.S. citizen or possess proof of legal presence; am able to read and write in the English language; am not currently incarcerated in a correctional facility or have served time during the immediate past ten years for a felony or misdemeanor offense in any state. I solemnly affirm, under the penalty of perjury, that the information provided in this application is true, complete, and correct; that I have carefully read the notary laws of Michigan; and that, if appointed and commissioned as a notary public, I will perform faithfully, to the best of my ability, all notarial acts in accordance with the law. I understand that all information contained on this application is subject to disclosure under the Freedom of Information Act, 1976 PA 442, MCL 15.231, et seq. I am enclosing a check or money order in the amount of \$10.00, payable to the State of Michigan, which I understand is a nonrefundable application processing fee.</p>												
COMMISSIONED NAME: <small>Print or type your name, as it will appear on all documents you notarize.</small>												
SIGNATURE: <small>Sign your name, as it will appear on all documents you notarize. Your signature must match your commissioned name printed above.</small>												

- Field 1:** Print or type your full legal name. It must match your state driver's license or ID card.
 - Field 2:** Print or type any previous and/or alias names. If none, check the box "N/A".
 - Field 3:** Provide your driver's license number or personal ID card number as well as issuing state.
 - Field 4:** Provide your residence address. It must match your state driver's license or ID card. (P.O. Boxes are not accepted.)
 - Field 5:** Provide your date of birth month, day and year.
 - Field 6:** Provide your email address. If none, check the box "N/A".
 - Field 7:** Provide business address. If none, check the box "N/A".
 - Field 8:** If you are not a licensed attorney in Michigan check the box "N/A". If you are a licensed attorney in Michigan you must submit your application directly to the Office of the Great Seal at Michigan Department of State. Submit to:
- Michigan Department of State
Office of the Great Seal
7064 Crowner Drive
Lansing, MI 48918
- Field 9:** Michigan residents provide your county of residence. Non-Michigan residents indicate your county of employment.
 - Field 10:** Provide your residence and business telephone numbers. If none, check the box "N/A" for either field.
 - Field 11:** Describe the date and circumstance of any felony or misdemeanor convictions during the previous ten years in this or any other state. Attach additional pages if necessary. If none, check the box "N/A".
 - Field 12:** Check the box "YES" or "NO" if you currently hold or have ever held a notary public commission in this or any other state. If "YES", indicate the state and date or unknown. If "NO", check the box "NO".
 - Field 13:** If you answered "YES" to a question in this field please explain. Attach additional pages if necessary. If you answered "NO" check the box "DOES NOT APPLY TO ME".

Note: Read the affirmation paragraph at the bottom of the application and sign your name exactly as it will appear on documents you notarize. Your "COMMISSIONED NAME" on field 1 of the application and your "SIGNATURE" on field 2 of the application MUST be the SAME and should be EXACTLY as you wish to be commissioned.