

AVOID DELAYS IN PROCESSING!

Important requirements and instructions on how to complete the APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION.

- **Important:** You must PRINT or TYPE on the application for Michigan notary public commission.
- **Important:** Use "N/A" for any information not applicable to you on the application.
- **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.



**MICHIGAN DEPARTMENT OF STATE
OFFICE OF THE GREAT SEAL**

Clear Form Print Form

For Office Use Only

Date of oath and bond: _____

Oath administered by, and bond filed with: _____ (Officer's initials)

County name: _____

APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION AND ATTORNEY REAPPOINTMENT

Use "none" or "N/A" if applicable. **Incomplete and/or handwritten applications will be returned. NON-REFUNDABLE FILING FEE: \$10**

Are you a resident of Michigan? <input type="checkbox"/> Yes <input type="checkbox"/> No		Field: Are you a resident of Michigan? Check "YES" or "NO".	
Full Name (first/middle/last): (Must match your State driver's license or ID card) _____		Field: Provide your full name (first/middle/last). It MUST match your driver's license or ID card.	
Driver's License or Personal ID # _____		Field: Provide your driver's license number or personal ID card number, issuing state and county of residence.	
State _____		Field: Provide any previous and/or alias names, date of birth (MM/DD/YYYY), email address and county of business.	
County of Residence _____		Field: Provide your full residence address. It MUST match your driver's license or ID card.	
Please indicate any previous and/or alias names _____		Field: Provide your full business address or write "N/A"	
Date of Birth _____	E-mail Address _____	Field: Provide your residence and business telephone numbers or write "N/A"	
County of Business _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
Residence Mailing Address (Must match license or ID card – include PO boxes, lot and Apt # if applicable) _____		Field: Provide your residence and business telephone numbers or write "N/A"	
City _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
State _____		Field: Provide your residence and business telephone numbers or write "N/A"	
Zip Code _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
Business Address _____		Field: Provide your residence and business telephone numbers or write "N/A"	
City _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
State _____		Field: Provide your residence and business telephone numbers or write "N/A"	
Zip Code _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
Residence Telephone Number _____		Field: Provide your residence and business telephone numbers or write "N/A"	
Business Telephone Number _____		Field: Licensed Attorney in Michigan, enter State Bar number or if not licensed attorney write "N/A" p. _____	
HISTORY			
YES	NO	Field: Read the "History Fields" and check "YES" or "NO" when answering the questions. If "YES" is checked in the 2 nd and 3 rd question indicate what is required.	
<input type="checkbox"/>	<input type="checkbox"/>	Within the last 10 years, have you been convicted of a felony or misdemeanor (including any time served/fees paid)?	
<input type="checkbox"/>	<input type="checkbox"/>	Do you currently hold or have ever held a notary public commission in this or any other state: If yes, indicate State: <input type="checkbox"/> Michigan <input type="checkbox"/> or State of _____	
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever had a notary public appointment in this or any other state: If yes, please explain below: <input type="checkbox"/> revoked <input type="checkbox"/> suspended <input type="checkbox"/> cancelled	

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 the \$10.00 non-refundable application processing fee. If I am a licensed attorney, I certify that I am in good standing in the State Bar of Michigan.

NAME: _____

Type your name

SIGNATURE: _____

Sign your name

Name Field: Print or type your name exactly as you want to be commissioned as.

Signature Field: Sign your name exactly as above and as you want to be commissioned as. Both MUST EXACTLY match.