

**Tradition of Trust & Integrity Empowering America's Notaries Since 1940.** 

Notary Service and Bonding Agency, Inc. 550 Hulet Drive, Suite 105 Bloomfield Hills, MI 48302

Toll Free: (800) 366 - 8279 Email: info@notarybonding.com Fax: (800) 637 - 5992 Website: notarybonding.com

## **Rhode Island Terms & Conditions:**

- The policy term is 1 year.
- Additional notaries employed during the term of the policy will be included at no extra cost. There will be no
  return premium for notaries who end their employment during the term of the policy.
- Employer's Liability Coverage as to Notary E&O is included at no additional premium.
- The business must employ 2 or more notaries to be eligible for coverage.

Rhode Island Employer's Blanket Errors & Omissions Policy Order Form:			
Select Your Employer's Bla	anket E&O Po	olicy:	Payment Options:
\$ 5,000 Blanket Policy	State		Indicate Entire Check or Money Order Number:
\$ 10,000 Blanket Policy	🗖 \$ 20.00/Year. Per Notary		
\$ 25,000 Blanket Policy	S 30.00/Year. Per Notary		Payable to: Notary Service and Bonding Agency, Inc.
			OR
Required Information:			
Number of Employees:			Charge Credit Card:
Pusinoss Nama			🗆 Visa
Business Name:			MasterCard
Business Name Type:			American Express
No Secondary Name		Trading As	Discover
Business Type:			
Corporation			Full Name on Credit Card
Partnership	🛛 Individ	ual	
Business Name:			Credit Card Number
Business Address:			
Business City:			Credit Card Expiration Date
Business State:			Credit Card Expiration Date
Business Zip Code:			x
Business County:			Signature of Cardholder (Mandatory for Credit Card
Business Phone:			Purchases)
Ship To Name:			Veur Order Tetel
Ship To Address:			Your Order Total:
Ship To City:			
Ship To State:			
Ship To Zip Code:			Grand Total Amount: \$
Daytime Phone:			
Email:		·····	
			RHODE ISLAND 05/2018