



# NOTARYBONDING.COM

Serving Over A Million Notaries Nationally Since 1940

Washington Notary Association Co.  
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Bloomfield Hills, MI 48302

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Fax: (800) 637 - 5992  
Website: notarybonding.com

## Washington 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.

## Washington Employer's Blanket Errors & Omissions Policy Order Form:

### Select Your Employer's Blanket E & O Policy:

- \$ 5,000 Blanket Policy  \$ 6.25/Year. Per Notary
- \$ 10,000 Blanket Policy  \$ 10.00/Year. Per Notary
- \$ 25,000 Blanket Policy  \$ 15.00/Year. Per Notary

### Required Information:

Number of Employees: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Name Type:

- No Secondary Name     DBA     Trading As

Business Type:

- Corporation     LLC     LLP
- Partnership     Individual

Business Address (Address, City, State & Zip Code):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business County: \_\_\_\_\_

Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Ship To Name: \_\_\_\_\_

Ship To Address (Address, City, State & Zip Code):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Payment Options:

Check or money order number: \_\_\_\_\_

Payable to: Washington Notary Association Co.

Charge My:

- Visa
- MasterCard
- American Express
- Discover

\_\_\_\_\_  
Name on Credit Card

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date

X \_\_\_\_\_

Signature of Cardholder (Required for Credit Card Purchases)

Grand Total Amount: \$ \_\_\_\_\_