



**LMI NOTARY SERVICE**  
**208 JAMES ST. SUITE B, SEATTLE, WA 98104**  
**(206)622-2643 \* 1-800-886-5299 \* FAX: (206)628-4690**  
**www.BeANotary.com**

YOUR NOTARY PUBLIC LICENSE IS UP FOR RENEWAL. TO RENEW YOUR COMMISSION, YOU MUST OBTAIN A NEW NOTARY BOND IN THE AMOUNT OF \$7,500 FOR THE NEW SIX YEAR TERM.

WE WILL TAKE CARE OF ALL THE DETAILS FROM FILING THE STATE FEES, SECURING YOUR BOND AND MANUFACTURING YOUR NOTARY SEAL.

TO START THE RENEWAL PROCESS WITH OUR SERVICE COMPLETE THE FOLLOWING STEPS:

1. COMPLETE YOUR CHOICES BELOW AND ON THE REVERSE SIDE & RETURN ALONG WITH A CHECK OR CREDIT CARD PAYMENT IN THE AMOUNT TO BE DETERMINED BY YOUR SELECTION PAYABLE TO **LMI NOTARY SERVICE**.

PER 44-06-04., THE STATE OF NORTH DAKOTA REQUIRES YOU TO OBTAIN A NEW SEAL OR NOTARIAL MARKING DEVICE WHEN YOU RENEW YOUR COMMISSION. WE CAN PROVIDE YOU WITH A NEW SEAL OR PREINKED STAMP WITH YOUR NEW EXPIRATION DATE THAT COMPLIES WITH THIS PROVISION. YOU WILL NEED TO FAX YOUR NEW "CERTIFICATE OF AUTHORIZATION" TO **LMI NOTARY SERVICE** SO WE MAY PRODUCE AND SHIP YOUR MARKING DEVICE TO YOU. WE CAN ALSO PROVIDE A NOTARIAL RECORD BOOK TO TRACK YOUR NOTARIZATIONS.

WE ALSO PROVIDE A \$5,000.00 **ERRORS AND OMISSIONS** INSURANCE POLICY FOR NOTARIES WITH YOUR BOND. THIS IS AN E & O POLICY THAT IS DESIGNED ESPECIALLY FOR NOTARIES AND COMES AT **NO EXTRA CHARGE!** WE ALSO OFFER ADDITIONAL AMOUNTS OF COVERAGE FOR YOUR PROTECTION. (SEE BELOW FOR MORE INFO).

**PLEASE USE THE FOLLOWING TO COMPUTE THE PRICE FOR THE OPTIONS YOU DESIRE.**

6 YEAR NOTARY BOND (\$7,500.00 REQUIRED BY THE STATE)	\$50.00	<b>\$50.00</b>				
6 YEAR E & O (\$5,000.00 COVERAGE)		NO CHARGE				
SECRETARY OF STATE'S FILING FEE (MANDATORY)	\$36.00	<b>\$36.00</b>	1	PREINKED RECTANGULAR STAMP Color: Blk__ Other__	\$20.00 \$____	
				2	PREINKED CIRCULAR STAMP Color: Blk__ Other__	\$22.00 \$____
				3	RECTANGULAR RUBBER STAMP	\$12.00 \$____
				4	CIRCULAR RUBBER STAMP	\$18.00 \$____
				5	LMI NOTARIAL RECORD BOOK	\$5.00 \$____
<b>OPTIONAL</b>						
\$5,000 ADD'L, \$10,000 TOTAL FOR A SIX YEAR TERM	\$30.00	\$____				
\$10,000 ADD'L, \$15,000 TOTAL FOR A SIX YEAR TERM	\$50.00	\$____				
\$20,000 ADD'L, \$25,000 TOTAL FOR A SIX YEAR TERM	\$75.00	\$____				

TOTAL ON THE ABOVE ITEMS \$\_\_\_\_ TOTAL DOLLAR AMOUNT OF ITEMS 1-5 \$\_\_\_\_

COMPLETE TOTAL \$\_\_\_\_

**\*\*All of the above items are shipped directly to you at no add'l fee\*\***

**CREDIT CARDS ACCEPTED - COMPLETE ON REVERSE**

2. WE HAVE ENCLOSED YOUR *NOTARY PUBLIC APPLICATION* AND YOUR *NOTARY BOND* FOR YOUR CONVENIENCE. SIMPLY COMPLETE SECTION #1 ON THE NOTARY SURETY BOND AS FOLLOWS:

PRINT NAME ON THE LINE DESIGNATED "APPLICANT" ALONG WITH YOUR ADDRESS INFORMATION. YOU WILL ALSO NEED TO COMPLETE THE ACKNOWLEDGEMENT OF PRICIPAL (APPLICANT) SECTION AND HAVE YOUR SIGNATURE NOTARIZED. *DO NOT COMPLETE ANY OTHER BLANKS IN THIS SECTION.*

3. YOU WILL ALSO NEED TO COMPLETE THE *NOTARY APPLICATION* INFORMATION IN THE BOX WITH YOUR NAME AND ADDRESS INFORMATION. YOU WILL ALSO NEED TO HAVE YOUR SIGNATURE NOTARIZED BY ANOTHER NOTARY AT THE BOTTOM OF THE PAGE IN THE AFFIDAVIT OF QUALIFICATIONS SECTION.

4. AFTER YOU HAVE COMPLETED THE *NOTARY PUBLIC APPLICATION* AND *NOTARY BOND* AND SIGNED IN THE DESIGNATED AREAS SEND YOUR *APPLICATION*, *NOTARY BOND*, AND THIS COMPLETED FORM ALONG WITH A CHECK OR CREDIT CARD INFO IN THE POSTAGE PAID ENVELOPE TO **LMI NOTARY SERVICE**.

REMEMBER , WE ARE ALWAYS HERE TO HELP WITH YOUR NEEDS AND QUESTIONS, AND TO MAKE YOUR JOB A LITTLE EASIER. WE HAVE BEEN PROVIDING THIS SERVICE FOR NOTARY PUBLICS FOR OVER THIRTY YEARS SO YOU CAN COUNT ON US FOR ASSISTANCE. THANK YOU FOR ALLOWING **LMI NOTARY SERVICE** TO PROCESS YOUR NOTARY RENEWAL BOND. WE ALSO HANDLE NEW NOTARY REQUESTS. **LMI NOTARY SERVICE** IS NOT AFFILIATED WITH ANY GOVERNMENT AGENCY AND/OR OFFICE.

**PLEASE COMPLETE REVERSE**

# NOTARY PUBLIC APPOINTMENT FORM

PLEASE TYPE OR PRINT CLEARLY

APPLICANT'S NAME \_\_\_\_\_  
(If different than below) (Middle Name or Initial, if used)

DAY PHONE \_\_\_\_\_ (Must be filled in) RES. PHONE \_\_\_\_\_ CURRENT EXP. DATE (Must be filled in) \_\_\_\_\_

+

+

+

+

EMPLOYERS NAME AND MAILING ADDRESS (If applicable) \_\_\_\_\_

CHANGE OF ADDRESS \_\_\_\_\_  
(If different than above) (Number & Street, Rural or P.O. Box)

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

## EASY INSTRUCTIONS:

1. DETERMINE YOUR SELECTIONS FROM THE OTHER SIDE.
2. COMPLETE AND RETURN THIS FORM, NOTARY PUBLIC APPOINTMENT FORM AND NOTARY BOND FORM, WITH APPLICABLE CHECK IN THE ENCLOSED SELF-ADDRESSED ENVELOPE.
3. MAKE A CHECK PAYABLE TO **LMI NOTARY SERVICE**.
4. FOR CREDIT CARD CHARGES, COMPLETE THE FOLLOWING:  
NAME OF CARDHOLDER: \_\_\_\_\_  
ACCOUNT#: \_\_\_\_\_  
TYPE OF CARD:  VISA  MASTERCARD  
EXPIRATION DATE: \_\_\_\_\_  
SIGNATURE OF CARDHOLDER \_\_\_\_\_
5. MAKE ANY NECESSARY CHANGES TO NAME AND ADDRESS ABOVE.

6. IF NOT SELECTING ADDITIONAL E & O INSURANCE, THE FOLLOWING MUST BE COMPLETED:

I HAVE BEEN OFFERED ADD'L NOTARY PUBLIC ERRORS & OMISSIONS INSURANCE FOR MY ADDED PERSONAL PROTECTION. HOWEVER, I ELECT TO DECLINE THE ADD'L COVERAGE.

**X** \_\_\_\_\_  
DATE

Return to:

**LMI NOTARY SERVICE \* 208 JAMES ST., SUITE B  
SEATTLE, WA 98104  
1-800-886-5299 Fax (206) 628-4690**



**NOTARY APPLICATION**  
**SECRETARY OF STATE**  
 SFN 11001 (06-05)

**For Office Use Only**

ID Number:
WO Number:
Secretary of State State of North Dakota 600 E Boulevard Ave Dept 108 Bismarck ND 58505-0500 Telephone: 701-328-2901 Toll Free: 800-352-0867 Ext 82901 Fax: 701-328-1690 Web Site: www.state.nd.us/sec

**FILING FEE: \$36.00**

**INSTRUCTIONS:**

- For reference, see North Dakota Century Code, Section 44-06.
- A commissioned Notary Public, **not the applicant**, must duly swear (or affirm) your Oath of Office and notarize your signature.
- In compliance with the Federal Privacy Act of 1974, the disclosure of the social security number on this form is voluntary. They are not disclosed to the public. The numbers are used by the Secretary of State to maintain accurate notary files. Therefore, while voluntary disclosure is requested, failure to do so will not invalidate this notary application.
- Along with the application, submit a six-year notary surety bond in the amount of \$7,500.00. (The spelling of the name on the bond must be identical to the name in box # 1, **which is the name and spelling you will always use when notarizing documents and which MAY NOT necessarily be your legal name.**)
- If you reside in a county which borders North Dakota, it will be necessary for you to complete an appointment of agent form.
- After the receipt of the fee, application and surety bond, you will be issued an authorization letter, which authorizes a vendor to provide you with an official notary seal/stamp. Once an impression of your seal/stamp is affixed to the return letter, the letter must be signed and returned to the Secretary of State's Office. When the return letter is received, approved, and filed, an official notary certificate of commission will be issued to you.

1. Name of Applicant:		E-mail Address:		2. Social Security #:	
3. Home Mailing Address:		City:	State:	Zip Code:	4. Home Telephone #:
5. Work Mailing Address:		City:	State:	Zip Code:	6. Work Telephone #:
7. Spouse's Complete Name:(If Applicable)		8. If applicant is <b>not</b> a ND resident, list your county of residence and which ND county it borders:			
9. Type of Application:		<input type="checkbox"/> New Appointment <input type="checkbox"/> Re-Appointment		Previous Expiration Date:	
10. <b>ALL</b> applicants must answer the following questions. If YES, attach a written explanation and ALL legal documentation, if applicable.					
<b>YES</b>	<b>NO</b>				
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been the subject of any inquiry or investigation by any division of North Dakota?			
<input type="checkbox"/>	<input type="checkbox"/>	Have you or has any occupational license held by you been censured, suspended, revoked, canceled, terminated or been subject to any type of administrative action in any state including North Dakota?			
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been charged with, or convicted of, or been indicted for, or entered a plea to, any criminal offense (felony, gross misdemeanor or misdemeanor), <u>other than</u> traffic violations, in any State or Federal Court?			
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been a defendant in any lawsuit involving claims of fraud, misrepresentation, coercion, mismanagement of funds, breach of fiduciary duty or breach of contract?			

**AFFIDAVIT OF QUALIFICATIONS AND OATH OF OFFICE**

I, the undersigned, being first duly sworn, hereby state that I am over the age of eighteen years of age, a North Dakota resident or reside in a county that borders North Dakota and which is in a state that extends reciprocity to a Notary Public who resides in a bordering county of this state, and that I desire to become a commissioned notary public in the State of North Dakota for a period of six years. I do solemnly swear (or affirm) that I will support the Constitution of the United States, and the Constitution of the State of North Dakota and that I will faithfully discharge the duties of the office of Notary Public according to the best of my ability, so help me God.

\_\_\_\_\_/\_\_\_\_\_  
 Applicant Signature in front of a commissioned Notary Public      Date

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and Sworn before me, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Notary Seal/Stamp)

\_\_\_\_\_  
 Notary Public

My Commission Expires: \_\_\_\_\_

