



**MICHIGAN DEPARTMENT OF STATE  
OFFICE OF THE GREAT SEAL  
Lansing, Michigan 48918-1750  
Telephone: 517/373-2531**

For County Use Only	
County Name	
Date of Oath and Bond	_ / _ / _
Oath administered, and Bond filed with:	(Clerk Initials)

**APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION**

(Please Print)

1. Driver License or Personal Identification Card	Number: _____	State: _____
2. Full Name:	_____ (First) _____ (Middle) _____ (Last)	
3. Commissioned Name:	_____ (First) _____ (Middle) _____ (Last)	
4. Date of Birth:	Month ___ Day ___ Year ___ ___ ___	
5. Residence Address:	_____ Number & Street _____ City _____ State _____ Zip	
6. E-mail Address: (Optional)	_____	
7. Business Address:	_____ Number & Street _____ City _____ State _____ Zip	
8. County:	<input type="checkbox"/> County of residence. <input type="checkbox"/> County of employment (if you are a non-Michigan resident).	
9. Telephone Numbers:	( ) - _____ (Residence)	( ) - _____ (Business)
10. Please describe date and circumstance of any felony or other conviction during the previous ten years in this or any other state. Attach additional pages if necessary. If none, please indicate N/A (Not Applicable)		
11. If you currently hold a notary commission in this or any other state, please provide the expiration date and the state that issued the commission.		
Current Commission Expires:		State:
12. If you have previously applied for an appointment as a notary public in this or any other state, please provide the result of that application, and whether you have ever had a notary public appointment revoked, suspended, restricted or canceled in this or any other state. Attach additional pages if necessary. If none, please indicate N/A (Not Applicable).		

**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; a US citizen or possess proof of legal presence; able to read and write the English language; 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.

**X**

\_\_\_\_\_  
Please sign your name as it will appear on documents you notarize. (Date)

By affixing my signature above, I understand that all information contained on this application form is subject to disclosure under the Freedom of Information Act, 1976PA442, MCL 15.231 et seq. I am enclosing a check or money order in the amount of \$10, payable to the State of Michigan, which I understand is a non-refundable processing fee.

**COMMISSIONED NAME:** Your commissioned name may differ from your full name. It should match the name you will use on notarized documents.

**OATH AND BOND FILING REQUIREMENTS:** Before sending the application to the Office of the Great Seal, you must swear a constitutional oath of office, file a \$10,000 surety bond and pay a \$10.00 filing fee with the county clerk. Information on where to obtain your surety bond and the cost is available from insurance agents and others that will solicit your business. **IMPORTANT:** You ***MAY NOT*** act as a notary public until the required oath, bond and fees are filed with the county clerk ***AND*** you have received your commission from the Office of the Great Seal.

**SUBMITTING APPLICATION AND FEE:** After swearing the oath and filing your bond with the county clerk, mail the completed application to:

**Michigan Department of State,  
Office of the Great Seal,  
7064 Crouner Blvd.,  
Lansing, MI 48918-1750**

A \$10.00 check or money order payable to the “**State of Michigan**” must accompany the application. ***Do not send cash.***

**RECEIVING YOUR COMMISSION:** Your notary commission will be mailed to the address provided on your application. Expect to receive your commission in approximately 5 – 10 working days after it is received by the Office of the Great Seal.

**TERM OF APPOINTMENT:** Notary commissions expire six (6) years from your next birthday at time of commission issuance. Report any change of name or address to the Office of The Great Seal on the approved form.

Please direct any questions about your notary application to the **Office of the Great Seal** at **517/373-2531**.

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