

County Seal



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

For County Use Only	
County name	
Date of oath and bond	
Oath administered by, and bond filed with:	<input type="checkbox"/> Attorney (oath only) (Clerk's initials)

APPLICATION FOR MICHIGAN NOTARY PUBLIC COMMISSION

(Please print or type; all fields are required)

1. Driver's license or personal identification card number:		Issuing state:	
2. Full name (first/middle/last):			
3. Residence address: (no PO boxes)		City:	State: Zip:
4. Date of birth:	5. E-mail address:		
6. Business address:		City:	State: Zip:
7. If you are a licensed attorney in Michigan, enter your State Bar number: P- (skip if you are not a licensed attorney)			
8. County: Please check, the above is your: <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 misdemeanor convictions during the previous ten years in this or any other state. Attach additional pages if necessary. If none, please indicate N/A.			
11. If you currently hold or have ever held a notary public commission in this or any other state, please provide the expiration date and the state that issued the most recent commission. My commission expires/expired (month/day/year):			
		Issuing state:	
12. Have you ever had a notary public appointment revoked, suspended, restricted, or cancelled, or applied for and been denied commission, in this or any other state? If yes, please explain. Attach additional pages if necessary. If none, please indicate N/A.			

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 a check or money order in the amount of \$10.00, payable to the State of Michigan, which I understand is a nonrefundable application processing fee.

**COMMISSIONED
NAME:**

Clearly print or type your name, as it will appear on documents you notarize.

SIGNATURE:

Sign your name, as it will appear on documents you notarize. Your signature must match your name printed above.

THIS APPLICATION MUST FIRST BE PROCESSED AT YOUR LOCAL COUNTY CLERK'S OFFICE BEFORE MAILING IT TO THE OFFICE OF THE GREAT SEAL.

Application for commission: A notary public who is currently commissioned in the State of Michigan may not submit a new application for commission earlier than 60 days prior to current commission expiration.

Commissioned name: Your commissioned name may differ from your full name as long as it is a derivative of your full legal name (Example: Jane Marie Doe could be Jane Doe, J.M. Doe or J. Doe). It must match the name you have printed and signed at the bottom of the first page of this application.

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 \$10,000.00 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 other companies that will solicit your business. A list of licensed surety agencies can also be found through our Web site at www.Michigan.gov/sos. If you are a licensed attorney in Michigan, you are not required to file a surety bond; enter your State Bar number on line 7. Your license status will be verified by the Office of the Great Seal.

Submitting application and fees to the Office of the Great Seal: After swearing the oath, filing your bond with the county clerk and paying the nonrefundable filing fee to the county clerk's office, mail your completed application to:

**Michigan Department of State
Office of the Great Seal
7064 Crowser Drive
Lansing, MI 48918**

A \$10.00 check or money order payable to the "State of Michigan" must accompany the application. Please do not send cash. This must occur within 90 days from the date the oath is administered and bond filed with the county clerk (MCL 55.273).

Receiving your commission: You may not act as a notary public until the required oath, bond, and fees are filed with the county clerk, you submit your application and fees to the Office of the Great Seal, and receive your commission. Your notary public commission certificate, with commission expiration date information, will be mailed to the residence address provided on your application. Please expect to receive your certificate within 14 business days after the Office of the Great Seal receives your application for processing. The residence address you list must match what is on file with the Michigan Department of State for your driver's license or personal identification card. If you provide a different address, your application will be returned to you with instructions on how to change your address using the Michigan Change of Address/Voter Registration form available on our Web site, www.Michigan.gov/sos, or by visiting a Secretary of State branch office.

Term of appointment: Notary commissions expire six (6) years from your next birthday at the time of commission issuance.

Change of name or address: All changes of name and/or address must be reported to the Office of the Great Seal on the Michigan Notary Public Request for Duplicate/Notice of Change form, available at our Web site www.Michigan.gov/sos. The name and residence address you list must match what is on file with the Michigan Department of State for your driver's license or personal identification card. If you provide a different name and/or address, your Request for Duplicate/Notice of Change form will be returned to you with instructions on how to change your address using the Michigan Change of Address/Voter Registration form available on our Web site, www.Michigan.gov/sos, or in the case of a name change, by visiting a Secretary of State branch office.

Notary public stamp and/or seal: Contact your local office supply store or printing shop for information on purchasing these items. The State of Michigan does not furnish or sell these items or make any other recommendations on where to obtain them. Use of these items is not required in the State of Michigan.

Please direct any questions about your notary application to the Office of the Great Seal at (888) SOS-MICH (767-6424).

MACOMB COUNTY NOTARY PUBLIC APPLICATION COVER FORM

MAIL THIS FORM TO MACOMB COUNTY CLERK
WITH YOUR NOTARY PUBLIC APPLICATION

TO: Macomb County Clerk's Office
Attn: Notary
40 North Main, Mount Clemens, MI 48043
Phone (586) 469-5205
Monday – Friday, 8 am – 4:30 pm (until 7 pm Wednesdays)

FROM: Name: _____
(Print clearly) Address: _____ City: _____ Zip: _____
Day Phone: _____ Cell Phone: _____
Fax Number: _____ E-mail: _____

RE: Notary Public Commission

DATE: _____

1. When mailing application, the following is required:

- \$10 check or money order payable to Macomb County Clerk or credit card information below completed and signed
- Original Application for Michigan Notary Public Commission (must be signed and notarized)
- Original bond (must be signed and notarized)

2. How do you want your copies returned to you? (check one)

- U. S. mail (sent to address above) - FREE
- Pick up at Macomb County Clerk's Office – FREE – Date: _____
- Overnight delivery – ADD \$24

3. Payment Information (check one)

- Check or money order payable to Macomb County Clerk enclosed
- Credit card – complete section below

CREDIT CARD INFORMATION

COST: \$10.00 Type of credit card being used:
SHIPPING: VISA MasterCard Discover American Express
 Overnight*: \$24.00 (optional) Credit Card Number: _____
 Regular mail: FREE _____
TOTAL COST: \$ _____ Expiration Date: ____ - ____

Cardholder name (PRINT)

Cardholder signature (REQUIRED)

*Delivery may take up to 2 days depending on the zip code or if request is not received before 1 pm. Rates are higher outside of the U.S.