



APPLICATION FOR APPOINTMENT AS TEXAS NOTARY PUBLIC

If renewing, mark this box: []

Commission Expires: ___/___/___

Identifying Information

Please Type or Print Legibly

Name to be used as notary public: (This is the name you will be required to sign when notarizing.)

Social Security No.:

Last First Middle (not required) Suffix

Required by TX Gov't Code §406

Mailing Address: (Please notify the secretary of state of an address change within 10 days)

Residence County:

TX State Zip

Email address for return of commission (Legible): (Your commission will come from notarypubliccommission@sos.state.tx.us and you will NOT receive materials by mail.)

Alternate email address for return of commission (optional):

Date of Birth: ___/___/___ Driver's License or Identification No.: ___ Issuing state: ___

Statements Relating To Qualification

I, the above-named applicant, have never been convicted of a felony or crime involving moral turpitude, am at least 18 years of age and a legal resident of Texas. {All applications are subject to a background check.}

Please select one of the following:

- A. I have been found guilty of a crime other than a Class C misdemeanor. (Applicants selecting this option must attach the following for each crime: (1) copies of court order and sentence, and papers pertaining to release from probation; and (2) a statement of (i) the nature, circumstances, date, and location, and (ii) whether the case is on appeal.) {A conviction for a crime involving moral turpitude OR a FELONY disqualifies you from appointment as a notary public under Texas law.}
B. I have never been found guilty of a crime OR I have only been found guilty of a Class C misdemeanor, e.g. minor traffic violations such as speeding.

Notary Public Surety Bond

(This space reserved for agency/bonding company)

KNOW ALL PERSONS BY THESE PRESENTS:

That we, the above-named applicant, as principal, and Merchants Bonding Company Mutual, as surety, a corporation duly licensed to do business in the state of Texas, are held and firmly bound unto the governor of the state of Texas and to his/her successors in office, in the sum of TEN THOUSAND DOLLARS for the payment of which, well and truly be made we bind ourselves, our heirs, executors and administrators jointly and severally. As a condition of this bond, the above-named principal shall faithfully perform all duties of the office of notary public.

BOND NUMBER:

Agency Name: NNA Insurance Services Address: 9350 De Soto Avenue, P.O. Box 2402, Chatsworth, CA 91313-2402

Date: Signature of authorized person for surety

Statement of Officer

I, the above-named applicant, do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Execution

I declare under penalty of perjury that the facts in the foregoing Statement of Officer are true. I further certify that the information provided in and with this Application is true and correct and that I am not disqualified by law or any other reason from holding the office of notary public. I agree to be bound by the terms and conditions of the incorporated surety bond.

Date: Signature of Applicant (sign in name given above on line #1 to be used as notary public)

How to Complete the Application for Appointment as a Texas Notary Public

Return to us:



Applications@NationalNotary.org



1-800-833-1211



National Notary Association
9350 De Soto Avenue
P.O. Box 2402
Chatsworth, CA 91313-2402

Fill out your application safely and securely!
NationalNotary.org/State-Applications/Texas

The NNA will submit your application electronically to the Texas Secretary of State upon receipt of your order and payment, speeding up your approval.

Form #2301 Rev. 04/2013	<p style="font-size: small;">This space reserved for SOS use</p>
If renewing, mark this box: <input type="checkbox"/> Commission Expires: ____/____/____	APPLICATION FOR APPOINTMENT AS TEXAS NOTARY PUBLIC
Identifying Information Please Type or Print Legibly	
A Name to be used as notary public: <i>(This is the name you will be required to sign when notarizing.)</i>	
Last _____ First _____ Middle (not required) _____ Suffix _____	Social Security No.: _____ <i>Required by TX Gov't Code §406</i>
Mailing Address: <i>(Please notify the secretary of state of an address change within 10 days)</i>	
Street _____ City _____ State _____ Zip _____	Residence County: _____
Email address for return of commission (Legible): _____ <i>(Your commission will come from notarypubliccommission@sos.state.tx.us and you will NOT receive materials by mail.)</i>	
Alternate email address for return of commission (optional): _____	
Date of Birth: ____/____/____	Driver's License or Identification No.: _____ Issuing state: _____
B Statements Relating To Qualification	
I, <i>the above-named applicant</i> , have never been convicted of a felony or crime involving moral turpitude, am at least 18 years of age and a legal resident of Texas. <i>[All applications are subject to a background check.]</i>	
Please select one of the following:	
<input type="checkbox"/> A. I have been found guilty of a crime other than a Class C misdemeanor. <i>(Applicants selecting this option must attach the following for each crime: (1) copies of court order and sentence, and papers pertaining to release from probation; and (2) a statement of (i) the nature, circumstances, date, and location, and (ii) whether the case is on appeal.) [A conviction for a crime involving moral turpitude OR a FELONY disqualifies you from appointment as a notary public under Texas law.]</i>	
<input type="checkbox"/> B. I have never been found guilty of a crime OR I have only been found guilty of a Class C misdemeanor, e.g. minor traffic violations such as speeding.	
C Notary Public Surety Bond (This space reserved for agency/bonding company)	
KNOW ALL PERSONS BY THESE PRESENTS: That we, <i>the above-named applicant</i> , as principal, and <u>Merchants Bonding Company Mutual</u> , as surety, a corporation duly licensed to do business in the state of Texas, are held and firmly bound unto the governor of the state of Texas and to his/her successors in office, in the sum of TEN THOUSAND DOLLARS for the payment of which, well and truly be made we bind ourselves, our heirs, executors and administrators jointly and severally. As a condition of this bond, the above-named principal shall faithfully perform all duties of the office of notary public. BOND NUMBER: _____	
Agency Name: <u>NNA Insurance Services</u>	Address: <u>9350 De Soto Avenue, P.O. Box 2402, Chatsworth, CA 91313-2402</u>
Date: _____	Signature of authorized person for surety _____
Statement of Officer	
I, <i>the above-named applicant</i> , do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.	
D Execution	
I declare under penalty of perjury that the facts in the foregoing Statement of Officer are true. I further certify that the information provided in and with this Application is true and correct and that I am not disqualified by law or any other reason from holding the office of notary public. I agree to be bound by the terms and conditions of the incorporated surety bond.	
Date: _____	Signature of Applicant <i>(sign in name given above on line #1 to be used as notary public)</i> _____
Form 2301	Questions may be directed to the Notary Public Unit at 512-463-5705.

A Enter your personal info

Make any corrections directly on the form or use the application wizard at NationalNotary.org/TX/Renew.

B Be sure you qualify

You are swearing that you meet the qualification requirements.

C Leave these lines blank

The NNA will complete this section before forwarding your application to the Secretary of State.

D Remember to sign and date

Sign your name exactly as it appears in the first section.

BONDS AND E&O POLICIES UNDERWRITTEN BY MERCHANTS BONDING COMPANY (MUTUAL), WEST DES MOINES, IOWA. PENNSYLVANIA BONDS AND E&O POLICIES UNDERWRITTEN BY MERCHANTS NATIONAL BONDING, INC., AN AFFILIATE OF MERCHANTS BONDING COMPANY (MUTUAL). AGENT FOR ALL BONDS AND E&O POLICIES IS N.N.A. INSURANCE SERVICES, INC. COMMISSION NUMBER AND COMMISSION EFFECTIVE AND EXPIRATION DATES REQUIRED FOR E&O POLICY ACTIVATION. THE COVERAGE PROVIDED BY ANY POLICY ISSUED SHALL BE DETERMINED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE POLICY ISSUED, ANY CONTRARY REPRESENTATIONS HEREIN NOTWITHSTANDING.