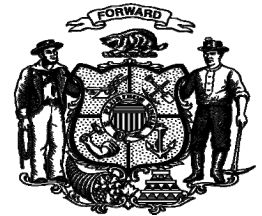


OFFICE USE ONLY
COMMISSION DATE:
<b>Fee: \$20.00</b>

# State of Wisconsin Four – Year Commission Notary Public Application



1. Is this your first Wisconsin commission?  Yes  No If “No,” indicate the most recent expiration date: \_\_\_\_\_

2. If the name on your last commission has changed and you have not notified us, list former name(s) here:

3. Current Full Name:	First	Middle	Last	Suffix
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4. Mailing Address	In Care of: (Business Name, if applicable)	Street Address or PO Box		
Address Line 2		City	State	Zip Code

5. Email Address	6. Date of Birth (MM/DD/YYYY)	7. Phone Number EXT
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8. Place a clear impression of seal/stamp sample here. If impression is not clear, apply sample to plain white paper and include with this application.

11. Did you ever have a notary commission, driver’s license or other state awarded license, suspended or revoked in Wisconsin or any other state?

Yes  No If “Yes,” include explanation.

12. Do you have a pending arrest or have you ever been convicted of a violation of Wisconsin, U.S. or any other state’s or country’s laws, including unpaid judgments or other incomplete court orders, including probation?

Yes  No If “Yes,” submit documentation of all arrests, including discharge papers, for each felony or misdemeanor. Violations resulting in a ticket only, submit a written explanation.

13. **To the Department of Financial Institutions:**  
I hereby apply for a four-year appointment as a Wisconsin Notary Public. I certify that I am a United States resident, educated with regard to the duties and responsibilities of a Notary Public, and that I have at least the equivalent of an eighth grade education, and that all of the information I have provided, is true.

**Applicant Signature** \_\_\_\_\_

- |   |   |
|---|---|
| Submit:   | Mail to:  |
| <ul style="list-style-type: none"> <li>Completed application</li> <li>Oath of Office</li> <li>Bond</li> <li>Notary Exam Certificate</li> <li>\$20.00 (If not already submitted electronically)</li> </ul> | <ul style="list-style-type: none"> <li>Notary Records Section</li> <li>WI Dept of Financial Institutions</li> <li>PO Box 7847</li> <li>Madison WI 53707-7847</li> </ul> |

9. Sign your name exactly as it appears on your seal/stamp

10. Print your name exactly as it appears on your seal/stamp			
First	Middle	Last	Suffix

## Four-Year Commission Notary Public Instructions

This document can be made available in alternative formats upon request to qualifying individuals with disabilities.

**You may NOT perform notarial acts until you are notified by the Department of Financial Institutions that the commission has been issued or reissued in the case of a reappointment**

### General Requirements:

In order to become a Notary Public under Wisconsin Statute §137.01, you must be a resident of the United States, 18 years of age or older, have at least the equivalent of an eighth grade education, pass the online Notary Public exam with 90% or better, (this can be taken an unlimited number of times until you pass [www.wdfi.org](http://www.wdfi.org)) and have demonstrated adherence to laws according to Wisconsin Statutes with regard to arrests/citations/convictions. (Note that under current law, persons convicted in state or federal court of a felony, or persons convicted of a misdemeanor involving a violation of the public trust, may not be commissioned as notaries public for the State of Wisconsin unless they have been pardoned of the conviction.)

### You must purchase:

- an engraved official seal or official rubber stamp that only contains "State of Wisconsin," "Notary Public" and your printed name that must include your full current last name. No title such as "Dr." or "CPA" should appear before or after your name
- a \$500.00 bond

**Keep in mind that when performing a notarial act you must always sign your name exactly as set forth on your seal/stamp. An application submitted with an un-clear seal/stamp impression or with additional non-notary seals affixed, cannot be accepted for filing and will be returned.** Before attempting to affix your new seal on to the application, take a few moments when you receive your seal/stamp and practice using it. If you have held a previous commission and are reapplying, be certain your seal/stamp impression is still totally clear and legible. If necessary, affix the impression on a separate piece of paper and attach it to your application. Do not affix other seals/stamps (those showing county or expiration dates) on the application form, as these seals/stamps are not considered "official" notary seals, and therefore, may not be affixed on the application.

### Instructions for the Four-Year Notary Application (numbers correspond to the form)

1. Indicate the expiration date of your most recent Wisconsin notary commission unless this is your first commission.
2. If you had a previous notary commission in Wisconsin and your name has changed, enter your former name(s)
3. Print or type your **FULL** legal name.
4. Print or type your complete mailing address. Use the C/O (care of) only if the mailing address is a business address.
5. Clearly print your email address (optional)
6. Print or type your date of birth.
7. Print or type your phone number with the area code. If you have an extension, enter that after your phone number.
8. Affix a clear impression of your notary seal/stamp in the space provided. (If the impression/stamp leaves an unclear mark, affix additional samples on a separate white sheet of paper and include the paper with your application.)
9. Sign your official notary signature using the exact spelling as shown on your notary seal/stamp.
10. Print or type your name exactly as signed (and as the name appears on the seal/stamp.)
11. Answer "Yes" or "No." Attach an explanation if you answered "Yes."
12. Answer "Yes" or "No." Attach an explanation if you answered "Yes."
13. Sign your name if you agree with the statement.

### You must complete and submit the following:

- Four-year Notary Public Application
- Bond Form
- Oath of Office Form
- Certificate from passing the Notary Exam with 90% or better ([www.wdfi.org/apps/NotaryTutorialExam/TableOfContents.aspx](http://www.wdfi.org/apps/NotaryTutorialExam/TableOfContents.aspx))
- \$20 filing fee made payable to the Wisconsin Department of Financial Institutions (if not already submitted electronically)

### Send the completed application to:

Notary Records Section  
Wisconsin Department of Financial Institutions  
P. O. Box 7847  
Madison, WI 53707-7847

### Contact us:

Call: 608-266-8915  
Fax: 608-264-7965  
TTY: 711

**NOTICE:** You are hereby informed that the information you provide on the application may be considered a public record available for public inspection. Wisconsin Statutes require that you provide written notice of any change of address to the Wisconsin Department of Financial Institutions within 10 days of the change. Grounds for revocation of your commission may include: providing false information on this application, submitting an application fee which is unredeemable due to insufficient funds or conviction for certain crimes while holding a commission.

## OATH OF OFFICE Four-Year Notary Public Commission

**Notary Applicant Section** (person applying for a four-year notary public commission):

\*\*\*\*\*IN THE PRESENCE OF A NOTARIAL OFFICER\*\*\*\*\*  
Complete lines 1 and 2. Do not notarize your own signature!

I do solemnly swear that I will support the Constitution of the United States and the Constitution of the State of Wisconsin, and will faithfully discharge the duties of the office of Notary Public, in and for the State of Wisconsin, to the best of my ability; that I am a resident of the United States, and am 18 years of age or older.

1. Notary Applicant Signature: \_\_\_\_\_

2. Notary Applicant Printed Name: \_\_\_\_\_

**Notarial Officer Section** (person who administers the oath to the applicant, and watches the applicant sign):  
Complete lines 3-9. Officer who signs line 6 may not be the applicant who signs line 1.

3. State of \_\_\_\_\_ 4. County of \_\_\_\_\_

5. Subscribed and sworn to before me on this day (MM/DD/YYYY): \_\_\_\_\_

**Note: The name and signature in numbers 6, 7 and 8 must be spelled exactly the same.**

6. Signature of Notarial Officer: \_\_\_\_\_

7. Print name of Notarial Officer: \_\_\_\_\_

8. Seal/Stamp of Notarial Officer

9. Check ONE box only:

Notarial Officer is a Notary Public whose commission expires on \_\_\_\_\_.

**OR**

Notarial Officer is a Notary Public whose commission is Permanent.

**OR**

Notarial Officer is not acting as a Notary Public but as authorized by Section 706.07 or 887.01, Wis. Stats., with this title:  
\_\_\_\_\_

## BOND INSTRUCTIONS

All persons applying or reapplying for a four-year notary public commission must purchase a \$500 bond from an insurance company. Contact the insurance company of your choice to purchase a bond. This bond form, or a bond form supplied by an insurance company, must be completed and submitted to the Wisconsin Department of Financial Institutions as proof that you have purchased a bond. Any bond form supplied by an insurance company must be in a format previously approved by DFI. The insurance company you choose to supply your bond must be qualified to write surety bonds in Wisconsin.

**Notary Applicant:** Complete sections 1-6. Section 1 must be an original signature.

**Insurance Agent:** Complete sections 7-13. Sections 9, 10, and 11 must indicate the surety company's information rather than the local insurance agency's name and address. For section 13, if a seal or stamp is affixed, the name of the surety company on the seal or stamp must match the name listed in section 9. If a power of attorney form is used, the agent's name as signed in section 7 must appear on the power of attorney.

## NOTARY PUBLIC BOND

KNOW ALL TO WHOM THESE PRESENTS SHALL COME, that we (notary applicant and surety), jointly and severally, undertake and agree that the notary applicant, upon appointment to the office of Notary Public, will faithfully discharge the duties of said office according to law, and that the surety will pay to the parties entitled to receive the same, such damages, not exceeding the aggregate FIVE HUNDRED DOLLARS (\$500) as may be suffered by them in consequence of the failure of the notary applicant herein to discharge his or her duties as a Notary Public.

### Notary Applicant – Complete 1 – 6

1. Signature of notary applicant		
2. Print name of notary applicant		
3. In care of: (Business name, if applicable)		
4. Mailing address of notary applicant		
5. City	State	Zip
6. Daytime telephone of notary applicant		

### Insurance Agent – Complete 7 – 13

7. Signature of surety company agent		
8. Print name of person who signed #7		
9. Print name of surety company		
10. Mailing address of surety company		
11. City	State	Zip
12. Date		

13. Surety company seal, stamp or power of attorney must be affixed.

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After this form has been completed, mail it in the same envelope along with your completed application, Notary exam certificate, Oath of Office, and \$20 filing fee (if not already paid online) to:

**Attn: Notary Records Section  
Wisconsin Department of Financial Institutions  
PO Box 7847  
Madison WI 53707-7847**

Questions? Call: 608-266-8915  
Fax: 608-264-7965  
TTY: 711