

TENNESSEE NOTARY PUBLIC APPLICATION

COUNTY OF ROANE

This application must be signed under oath in the presence of a Notary Public and submitted to the County Clerk at least 5 days prior to the meeting of the County Legislative Body at which it is to be considered. Once elected, you must then be commissioned by the Governor. If elected, you will be required to post a bond in the amount of Ten Thousand Dollars (\$10,000.00). The bond must be filed in the office of the County Clerk, who will accept the required fees and administer the oath of office. You are not authorized to act as a Notary Public until you have received your commission from the Governor, filed your bond, and taken the Oath of Office. If you move your residence or your principal place of business out of this county, you are required by law to notify the County Clerk of the change of address.

ANSWER EVERY QUESTION, PLEASE PRINT OR TYPE.

Date of Application: \_\_\_\_\_ Check One: \_\_\_\_\_ New \_\_\_\_\_ Re Appointment

Full Name: \_\_\_\_\_  
First Middle Last

Notary Name: \_\_\_\_\_  
Print name that you will use when notarizing documents (must match signature below)

Residence Address: \_\_\_\_\_  
Street Address City State Zip

Name of Employer: \_\_\_\_\_

Principal Business Address: \_\_\_\_\_  
Street Address City State Zip

Telephone: Residence: \_\_\_\_\_ Business: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

For RENEWAL applicants, give the expiration date of your current commission: \_\_\_\_\_

PLEASE ANSWER THE FOLLOWING QUESTIONS YES OR NO:

Table with 3 columns: Question, Yes, No. Contains 9 questions regarding legal disqualifications and citizenship.

I DO SWEAR OR AFFIRM UNDER PENALTIES OF PERJURY THAT THE STATEMENTS ABOVE ARE TRUE AND CORRECT.

Signature of Applicant

State of Tennessee  
County of Roane

Personally appeared before me, \_\_\_\_\_, with whom I am personally acquainted and who acknowledged that he/she executed the within instrument for the purposes therein contained.

Witness my hand, at office, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public

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