



**PRINT OR TYPE CLEARLY. FILL OUT APPLICATION COMPLETELY.** Do not leave any blanks.  
 Use "none" or "N/A" if applicable. **An incomplete application will delay your appointment.**  
**FEE: \$40** – make check or money order payable to: COMMONWEALTH OF PENNSYLVANIA.

**CHECK ONE:**  **New Appointment**  
 **Reappointment** (have been a notary in Pennsylvania before)

<b>Complete the following if you have ever been a notary in Pennsylvania before:</b>	
Notary commission expiration date	Full name on previous commission
Notary commission ID number	Other name used on previous commission

For Official Use Only

<b>PART I: Applicant Information (NOTE: Employer/Business contact information will be public record)</b>			
First Name	Middle Name or Initial (if used)	Last Name	Suffix (if applicable)
Date of Birth (mm/dd/yyyy)	Social Security Number (xxx-xx-xxxx)	Email Address (Optional)	
Name of Employer/Business where Notary Commission will be used (Do not leave blank. If not applicable, please indicate.)			
Employer/Business Street Address (P.O. Box alone is insufficient)		City	State
Employer/Business Telephone (include area code)		Municipality (city/borough/township)	County
Home Street Address (P.O. Box alone is insufficient)		City	State
Home Telephone (include area code)		Municipality (city/borough/township)	County
Home Telephone (include area code)		Municipality (city/borough/township)	County

<b>Part II: Education, Criminal History, Other Notary Commission History (Check or mark appropriate boxes)</b>	<b>YES (√)</b>	<b>NO (√)</b>
I am a notary applicant for initial appointment or reappointment and I have completed a pre-approved three-hour notary public education course within the six-month period immediately preceding this application (unless permanently exempted). <b>Attach a copy of your course completion certificate and retain your original.</b> Lack of proof of education will result in application rejection.		
Have you ever been convicted of or entered a plea of guilty or nolo contendere to a felony or lesser offense preceding the date of this application? If yes, attach full details (name of court, plea or conviction, sentence and length of probation) and appropriate supporting documents with a signed and dated personal explanation.		
Have you ever resigned a notary commission or had a notary commission suspended, revoked or otherwise disciplined by the Commonwealth or any other state/jurisdiction preceding the date of this application? If yes, attach full details and appropriate supporting documents with a signed and dated personal explanation.		
Have you ever had any other professional or occupational license suspended, revoked or otherwise disciplined? If yes, attach full details and appropriate supporting documents with a signed and dated personal explanation.		

Note that disclosing your social security number on this application is mandatory for the Department of State to comply with the requirements of the federal Social Security Act pertaining to child support enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa. C.S. § 4304.1(a). To enforce domestic child support orders, the Commonwealth's licensing boards must provide to the Department of Public Welfare (DPW) information prescribed by DPW about the licensee, including the social security number.

**APPLICANT AFFIDAVIT:** I am of good moral character and am familiar with the duties and responsibilities of a notary public. I shall furnish additional evidence of these statements, if requested, which shall be satisfactory to the Secretary of the Commonwealth. To the best of my knowledge and belief, this application contains no misrepresentations or falsifications, omission or concealments of material fact and the information given by me is true and complete. I understand that any false statement made is subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation, or denial of my notary commission.

\_\_\_\_\_  
**Applicant Signature (must match name in Part I)** \_\_\_\_\_  
Date

<b>PART III: To be completed by Pennsylvania Senator before application is submitted. It is the applicant's responsibility to obtain the signature of the Senator.</b>		
I HEREBY ENDORSE THE APPLICATION OF THIS APPLICANT WHO IS A RESIDENT OF MY SENATORIAL DISTRICT OR, IF NOT A PENNSYLVANIA RESIDENT, WHO IS EMPLOYED IN MY SENATORIAL DISTRICT. (All information below must be completed by the Senator.)		
_____ Signature of Senator	_____ District	_____ Date

### To qualify for appointment and commission as a Pennsylvania Notary Public, you:

- Must be at least eighteen (18) years of age
- Must be a resident of Pennsylvania or be employed within this Commonwealth
- Must be of good moral character and familiar with the duties of a notary public
- Must have completed a pre-approved three-hour notary education course within the six-month period immediately preceding the application, unless permanently exempted (see Mandatory Education Requirement and Exemption below)
- Must not have been convicted or pled guilty or nolo contendere to a felony or a lesser offense incompatible with the duties of a notary public during the five-year period preceding the date of application [A felony conviction or a plea of guilty or nolo contendere to a felony OR a commission revocation in the Commonwealth or any other state within the five years prior to application will result in application rejection.]

### The following persons are NOT eligible to hold the office of Notary Public:

- Any person holding any judicial office in Pennsylvania, except the office of justice of the peace, magistrate or alderman.
- Any member of the Congress of the United States, and any person, whether an officer, a subordinate officer or agent holding any office or appointment of profit or trust under the legislative, executive, or judicial departments of the government of the United States, to which a salary, fees or perquisites are attached.
- Any member of the General Assembly of Pennsylvania.

### Notary Public Application Procedures

General Instructions: This application must be **TYPEWRITTEN or PRINTED legibly**. Applications will be accepted only on the form approved for use by the Secretary of the Commonwealth. This form may not be altered in any way. Do not send a copy of your completed form, only the original will be accepted. All answers are subject to investigation and false statements will be deemed as adequate grounds for rejection.

**PART I:** Use your full name as you would like it to appear on your commission. Nicknames will not be accepted. You may use any of the following: full first name and last name; full first name, middle initial and last name; full first name, full middle name and last name; first name initial, full middle name and last name. Your signature at the bottom of the application must match the full name printed in this section. Your commission will be prepared and issued in this name. If applicable, employer business information may be the same as home address information (i.e., home office).

**PART II:** Answer all questions. Where "yes" is checked, supply full details and appropriate supporting documents with a signed and dated personal explanation.

**PART III:** Each application must be endorsed by the State Senator of the Senatorial District in which the applicant resides or if the applicant is not a Pennsylvania resident, endorsed by the Senator of the district in which the applicant is employed. In the case of a vacancy in the proper district, the endorsement may be obtained from a Senator of an adjacent district. The website [www.pasen.gov](http://www.pasen.gov) can assist you in finding your district and the corresponding Senator. The Senatorial endorsement must be obtained prior to submitting the application to the Department of State. The Senator's office may forward the application to the Department after endorsement.

**Completed applications for reappointment** must be filed in this office **AT LEAST TWO TO THREE MONTHS** prior to the expiration of the current commission. Renewal applicants should allow **AT LEAST ONE MONTH** for processing after submitting a completed renewal application to the Department of State.

**New appointees** should allow **AT LEAST FOUR TO SIX WEEKS** for processing after submitting a completed application to the Department of State. If notice of appointment is not received within this time, inquiry should be sent to the address on the front of the application.

**Filing Fee:** Each application must be accompanied by a check or money order for \$40.00, made payable to "Commonwealth of Pennsylvania," and mailed to 210 North Office Building, Harrisburg, PA 17120. **The fee is non-refundable.** Please note: the Secretary of the Commonwealth is authorized to revoke the notary public commission of a notary public who issues a personal insufficient funds check to the order of any State agency or the Commonwealth subject to the right of notice, hearing and adjudication and right of appeal.

**Oath of Office, Bond, Recording:** Upon appointment, the Secretary of the Commonwealth will send notice of appointment to the applicant, with further instructions and an official bond and oath form to be executed by the applicant. These materials will be sent to the applicant's business address as provided on the application. The applicant should record the commission, executed bond and oath form in the Recorder of Deeds in the county where their office is located. This must be completed within **FORTY- FIVE (45) DAYS** after the date of appointment or **the commission becomes null and void. Extensions will not be given.**

**All correspondence from the Department of State concerning your notary public application, notice of appointment to office and bond will be mailed to the employer/business address you have provided on your application. Your name, employer/business name, employer/business address, employer/business telephone number and commissioning history will become public information. If you list your home address, "N/A" or "None" in the employer/business address section of the application, your home address and home telephone number will become public information.**

### Mandatory Education Requirement and Exemption

The Notary Public Law, as amended by Act 151 of 2002 (effective July 1, 2003), requires that applicants for both initial appointment and reappointment as a notary public complete at least three hours of approved notary education within the six months immediately preceding their application for appointment or reappointment. However, any applicant for **reappointment** who was appointed **on or before July 1, 2003** and whose notary commission was in effect **on July 1, 2003**, is **permanently exempted** or "grandfathered" from the education requirement. In other words, all notaries public who held active commissions on July 1, 2003 are not required to complete approved notary education upon their reappointment.

Excluded from the "grandfather clause" ruling are those notaries who: 1) received a letter of appointment or reappointment **prior to July 1, 2003**, but failed to obtain a bond and have the bond, the commission and oath recorded within the allotted 45 days; 2) resigned their commissions **prior to July 1, 2003**, and did not seek reappointment **prior to July 1, 2003**; 3) permitted their commissions to expire **prior to July 1, 2003**, and did not seek reappointment **prior to July 1, 2003**; and 4) had a commission revoked **prior to July 1, 2003**, as the result of a disciplinary action taken by the Department.