

## **COMMONWEALTH OF KENTUCKY** MICHAEL G. ADAMS, SECRETARY OF STATE

Notary Commissions P.O. Box 821 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Notary Public Application for Appointment or Reappointment			
FEE: \$10				
IF YOU ARE CURRENTLY	COMMISSIONED AS A KY NOTARY PUBLIC	YOU MUST PROVIDE TH	IE FOLLOWING (See Instruction	s):
Commission expiration date	Commission ID #	Are you registered	Are you registered for electronic notarial acts?	
ALL OF THE FOLLOWING	G INFORMATION IS REQUIRED:			
	int full legal name)			
Date of birth:	Telephone num	ber:		
Residential address:				
City:	County:	State:	Zip Code:	
Business address:				
City:	County:	State:	Zip Code:	
County of Commission: (Must	match county of residence or business)			

Email address:

(Your notification of appointment will be delivered to you by email from sosnotary@ky.gov and you will NOT receive materials by mail)

## **DECLARATION OF QUALIFICATIONS**

I, the above-named applicant, hereby affirm under penalty of perjury that I am at least 18 years of age, am a citizen or permanent resident of the United States, am a resident of or have a place of employment or practice in the county in Kentucky as indicated in the information above, am able to read and write English and am not disqualified to receive a notary commission under KRS 423.395.

I also hereby affirm that the answers submitted to the following questions are true and correct:

- 1. Have you been convicted of a felony?
  \_\_\_\_\_\_No
  \_\_\_\_Yes Persons convicted of a felony must submit a copy of the order of restoration of their civil right to hold public office in addition to all
  - documentation regarding the charges and the disposition thereof.
- Have you been convicted of, or entered a plea to any crime involving fraud, dishonesty, or deceit? \_\_\_\_\_No 2. Yes
- Have you ever been denied a professional license or had a professional license held by you conditioned, suspended, revoked, canceled, 3. terminated, or not renewed for reasons involving fraud, dishonesty, or deceit? \_\_\_\_\_ No \_\_\_\_\_ Yes
- 4. Have you ever been denied a notary commission or had a notary commission conditioned, suspended, revoked or otherwise subject to

administrative action in Kentucky or any other state? \_\_\_\_\_No \_\_\_Yes If answering yes to any of the above questions, please refer to the instructions on page 2 of this application. You must submit a written statement detailing the circumstances and a copy of all documentation related to each action. You may be asked to submit a criminal background check as well. \*For persons with a felony conviction, you must also provide a copy of the order of restoration of your civil right to hold office.\*

By signing below, the undersigned acknowledges that the Secretary of State may deny, refuse to renew, revoke, suspend or impose a condition on a notary commission for any act or omission that demonstrates that the applicant lacks the honesty, integrity, competence, or reliability to act as a notary public and that by delivering this application to the Secretary of State, the undersigned is deemed to have declared under penalty of perjury that the answers and information provided are true and correct.

SIGNATURE OF APPLICANT:

## Notary Public Application for Appointment or Reappointment Instructions

Fee: The application must be accompanied by the fee of \$10; checks may be made payable to the Kentucky State Treasurer.

**Current Notary Information**: Complete this section ONLY if you are currently a KY notary public. DO NOT submit an application for reappointment more than 60 days prior to your current commission expiration.

- If your commission has expired, do not complete this section.
- Your expiration date and commission ID # can be found on your commission certificate. If you do not have this information, you may order a replacement certificate by submitting a request form and fee of \$10 to our office. The form is available online: sos.ky.gov
- If you are currently registered with the Secretary of State to perform notarial acts with respect to electronic records, you must indicate this on the application for reappointment. You will be required to submit additional information to update your registration.

Name of Applicant: KRS Ch. 423 and 30 KAR 8:005 require the applicant's full legal name to appear on their commission certificate.

Date of Birth and Telephone Number: This information is required by KRS Ch. 423 and 30 KAR 8:005.

Address: Both a residential and business address are required by KRS Ch. 423 and 30 KAR 8:005. If you do not have a business address, you may indicate it as Not Applicable.

**County of Commission**: KRS Ch. 423 requires that an applicant either resides in or has a place of business in the county of commission. If you do not live or work in Kentucky, you are not eligible for a Kentucky notary commission. *The application will be rejected if the county of commission does not match either the residential or business address listed on the application.* 

**Email Address**: This information is required by 30 KAR 8:005. The approval notification is sent by email from <u>sosnotary@ky.gov</u>; we no longer send notifications by postcard. If you do not have an email address and cannot obtain one, you may indicate this as Not Applicable and we will send a postcard by mail.

**Declaration of Qualifications**: Before signing the application, carefully read the prepared statement of qualifications and answer each question "Yes" or "No".

- The Constitution of the Commonwealth of Kentucky prohibits persons convicted of a felony from holding public office. This can be overcome by a pardon or restoration of civil rights from the Governor. If you have been convicted of a felony, you must provide a copy of the order from the Governor restoring your civil right to hold office. For more information, contact the Office of the Governor directly: (502) 564-2611.
- KRS 423.395 sets forth additional reasons for the denial of or refusal to renew a notary commission. This statute may be examined at sos.ky.gov or by contacting the Legislative Research Commission directly: (502) 564-8100.
- If any of the four questions are answered in the affirmative, you must provide a complete explanation of the circumstances, along with court records or a criminal background check documenting the charges filed and the disposition of said charges. When sufficient documentation has been received, the application will be submitted for further review. Due to the requirement for further review, these applications may not be submitted electronically and must be mailed to the office.

**Signature of Applicant:** By signing the application, the applicant is deemed to have declared under penalty of perjury that the answers and information provided are true and correct. KRS 423.360 requires that when performing a notarial act, the notarial certificate must be signed by the notary public in the same manner as on file with the Secretary of State.

**Delivery of Application**: The application may be mailed to the office at the address provided on page 1 of this application along with the fee of \$10 or the application may be submitted online and the fee may be paid electronically: sos.ky.gov

**Completion of Commission**: Upon approval of the application, an email notification will be sent to the address provided on the application. If you do not receive this notification within 10 business days, you may contact the office to request a new notification to be sent. The notification will instruct you to contact the **county clerk in the county of commission** directly to make arrangements to post the required \$1000 surety bond, take the oath of office, and receive your commission certificate. For more information on completing the commission, contact the **county clerk**.