

PORTAGE COUNTY BAR ASSOCIATION
NOTARY COMMITTEE
P. O. BOX 785
RAVENNA, OHIO 44266

Enclosed is an application form for the position of Notary Public. Please fill out the application and return same to this office with a check in the amount of \$35.00, payable to the Portage County Bar Association.

Upon receipt of the application, a letter stating the date and time the test will be given will be sent to you. We will also send you a manual from which you may study for the test.

If you have any questions regarding Notary Public, please contact this office.

Sincerely,

PORTAGE COUNTY BAR ASSOCIATION
NOTARY COMMITTEE

By: Timothy R. Thomas, Esq.

**PORTAGE COUNTY BAR ASSOCIATION
APPLICATION FOR NOTARIES PUBLIC
PORTAGE COUNTY, OHIO**

1. Name of Applicant _____
2. Social Security Number _____
3. Date of Birth _____
4. Name of Spouse _____
5. Home Phone Number _____
6. Home Address _____
7. Other addresses during the past five years _____

8. Presently employed by whom _____

9. Last previous employment and by whom _____

10. How long have you been a resident of Portage County? _____
11. How long have you been a resident of the State of Ohio? _____
12. In what county are you registered to vote: _____
* If not Portage, see note at bottom of application on the back.
13. Have you ever been a Notary in Ohio? (state which county) _____
If so, state expiration date of commission _____
14. Have you ever had a Notary Commission or application for same revoked? _____
If so, attach statement telling where, when and the reason for revocation.
15. Have you ever been convicted of a crime or traffic violation resulting in a fine of \$100.00 or more or imprisonment?
_____ If yes, attach statement telling what crime, the court, date and fine (if any).
16. Have you ever been removed from any office for reason involving moral turpitude or had a business or professional license revoked? _____ If yes, attach statement giving full details.
17. a) Have you ever made application and been refused a bond? _____
If yes, attach statement giving full details.
b) Have you ever been bonded and had a claim made against the bond? _____
If yes, attach statement giving full details.
18. As a consideration for the certificate of my qualifications to act as Notary Public, I hereby represent and agree that as such Notary Public,
 - A. I will perform only such acts as a Notary Public is authorized to do by law.
 - B. I will not charge or accept an amount exceeding the legal fees for such services.
 - C. I will not give any legal advice.
 - D. I will not prepare, draw or draft for other persons, any legal papers such as deeds, notes, wills, mortgages, chattel mortgages, contracts, partnership agreements, articles of incorporation, options, leases, contracts for purchase or sale of real estate, escrow instruments, releases, mechanics liens, affidavits, bulk sales affidavits or bills of sale.
 - E. I WILL NOT CERTIFY TO AN AFFIDAVIT OF A PERSON WITHOUT ADMINISTERING THE OATH (OR AFFIRMATION) TO SUCH PERSON.
 - F. I WILL NOT CERTIFY TO ANY ACKNOWLEDGMENT OF ANY DOCUMENT IN THE ABSENCE OF THE PERSON SO ACKNOWLEDGING HIS OR HER SIGNATURE.
 - G. I will not perform any notarial act after the date of expiration of my commission.

I hereby respectfully apply to the Judge of the Court of Common Pleas of Portage County, for a certificate to the Governor of Ohio recommending my appointment as a Notary Public in and for the State of Ohio.

In Witness Whereof, I have hereunto set my hand this _____ day of _____, 20__.

X _____
Signature of Applicant

Sworn to before me and subscribed in my presence this _____ day of _____, 20__.

Notary Public Title and County

Print Name Date of Expiration

CHARACTER REFERENCES

Applicant must procure the certificates below from three (3) reputable citizens of Portage County, Ohio.

1. I have known _____ for _____ years. My knowledge has been based upon _____
(Work, Social, Neighborhood, Etc. Contact)

I certify that she/he is of good moral character and possessed of sufficient qualifications and ability to discharge the duties of Notary Public.

NAME _____ ADDRESS _____
(signature)

2. I have known _____ for _____ years. My knowledge has been based upon _____
(Work, Social, Neighborhood, Etc. Contact)

I certify that she/he is of good moral character and possessed of sufficient qualifications and ability to discharge the duties of Notary Public.

NAME _____ ADDRESS _____
(signature)

3. I have known _____ for _____ years. My knowledge has been based upon _____
(Work, Social, Neighborhood, Etc. Contact)

I certify that she/he is of good moral character and possessed of sufficient qualifications and ability to discharge the duties of Notary Public.

NAME _____ ADDRESS _____
(signature)

Send completed application form, with a check in the amount of \$35.00 payable to the Portage County Bar Association, Notary Committee, P.O. Box 785, Ravenna, Ohio 44266.

* For a person to become a Notary Public he or she must make application in their county of residence.