

PLEASE CHECK ONE:

NEW

RENEWAL

APPLICATION FOR TENNESSEE NOTARY PUBLIC MADISON COUNTY, TENNESSEE

Fred W. Birmingham, County Clerk
100 E. Main Street Room 104
Jackson, TN 38301

YOUR PERSONAL OR COMPANY CHECK MADE PAYABLE TO "MADISON COUNTY CLERK" IN THE AMOUNT OF \$12.00 (TWELVE DOLLARS) MUST ACCOMPANY THIS NOTARIZED APPLICATION. APPLICATION MUST BE ON FILE TEN (10) DAYS BEFORE THE MADISON COUNTY BOARD OF COMMISSIONERS MEETING. THE COMMISSION MEETS EVERY MONTH.

DATE OF APPLICATION ____/____/____

APPLICATION MUST BE PRINTED OR TYPED

Notary Name _____
(PRINT) (Name that you will use when notarizing documents--Must match signature below)

Age: _____ Sex: _____

Residence Address: _____ City _____ Zip _____

Name of Employer: _____

Business Address: _____ City _____ Zip _____

Residence Phone: _____ Business Phone: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS WITH A YES OR NO

Are you a resident of Madison County or do you have a principal place of business in Madison County? _____

Have you ever been convicted of offering or giving a bribe, larceny, or any other offense declared infamous by law? _____

If the answer to the previous question was YES, has your citizenship been restored? _____

Is there an unpaid judgment against you for money received in an official capacity and due to the United States, to Tennessee or any Tennessee County, or are you a defaulter to the treasury? _____

Are you a soldier, seaman, marine, or airman in the regular Army, Navy, or Air Force of the United States, a member of the United States Congress, or a person holding any office of profit or trust under any foreign power, other state or the United States? _____

Have you ever been removed from office as a notary public for official misconduct? _____

Have you ever had a notarial commission revoked or suspended by this or any other state? _____

Have you ever been found by a court of this state or any other state to have engaged in the unauthorized practice of law? _____

Is there an other reason that you are legally disqualified from holding the office of a notary public? _____

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

Signature of Applicant: _____

(Must match "Notary Name" above)

APPLICANT'S SIGNATURE MUST BE NOTARIZED

State of Tennessee

County of _____

Sworn to and subscribed before me this _____ day of _____, 20_____

Notary: _____

My commission expires: _____