APPLICATION FOR NOTARY PUBLIC COMMISSION

Application Fee: 10.00

Check One

☐ New Appointment

☐ **Re-Commissioning** -A current or former Notary applying for a new notary commission must complete a new application (If your name has changes since your last application, identify on the line below the exact name you used on that prior application.) _____.

NAME: _____
Last First Middle

AKA: _____
(List all other names used within the past five (5) years: alias names, maiden names, previous married names)

Date of Birth: _____ **Place of Birth:** _____
City State Country

Social Security No.: _____ **Telephone No.:** _____

If applicable:
Enrollment Number: _____

If applicable
Tribe: _____

***PHYSICAL**
*** ADDRESS:** _____
Number and Street City State Zip County

Prior Addresses for the Last 5 years.

Address: _____
Number and Street City State or Province Zip County

Address: _____
Number and Street City State or Province Zip County

Address: _____
Number and Street City State or Province Zip County

Please use additional paper if needed and attach to this application.

If your Physical address listed above is not within the LTBB reservation boundaries you must complete one of the following below:

(1) If you own a business within the LTBB Reservation boundaries please list. OR
(2) If you are an employee of the Little Traverse Bay Bands of Odawa Indians please list. OR
(3) If your regular place of work is within the LTBB Reservation boundaries please list.

_____ _____
Employer's Or Business Name Telephone NO.

_____ _____
Employers Physical Address Or Business Address Your Position

_____ _____
City State Zip code Length of employment