



(800) 331-6053

NOTARY PUBLIC BOND APPLICATION

Please complete and email by clicking on the Submit Form button below, or fax to (605) 335-0357.

State where applying for commission _____ Effective Date _____

Name (as will appear on commission) _____

Home Address _____

City _____ State _____ Zip Code _____

Email _____ Telephone _____

Mailing Address _____

City _____ State _____ Zip Code _____

County of Appointment _____ Date of Birth (MI only) _____

Are you currently a notary? Yes No In what state? _____

If yes, what is the expiration date of your current commission? _____

KY Notaries: County or State-At-Large bond needed? _____ Bond Amount \$ _____

Required for a nonresident or County-At-Large bond, otherwise optional:

Name of Employer _____

Address _____

City _____ State _____ Zip Code _____

Employer County _____

If you would like to purchase **Notary Errors and Omissions Insurance** to protect you when performing your duties as a notary, please select an amount. (Higher limits, up to \$100,000, may be available, depending on the state.)

\$10,000 \$25,000 (\$30,000 in California)

State	Bond Premium	\$10,000 E&O	\$25,000 E&O
AL, AK, AZ*, IN*, KS*, MS*, MO*, NM*, PA, UT	\$50	\$65	\$104
AR	\$50	\$130	\$208
CA	\$50	\$35	\$295 (\$30,000 E&O)
DC*	\$50	\$81.25	\$130
FL	\$40	\$40	\$60
HI	\$50	\$70.25	\$260
ID	\$60	\$78	\$117
IL*	\$30	\$65	\$104
KY, NE*	\$40	\$65	\$104
LA	\$110	\$121	\$182

State	Bond Premium	\$10,000 E&O	\$25,000 E&O
MI*	\$55	\$45	\$120
MT	\$40	\$52	\$78
NV	\$50	\$78	\$117
ND, SD*	\$50	\$97.50	\$156
OK*	\$30	\$65	\$104
TN*	\$50	\$52	\$104
TX	\$50	\$34	\$51
WA	\$50	\$40	\$60
WI	\$20	\$65	\$104
WY	\$50	\$50	\$80

*Purchase of bond includes Complimentary E&O

Your CNA Surety Agent is:

SUR Insurance Agency, Inc.

Address P.O. Box 5077

Sioux Falls, South Dakota 57117-5077

City State Zip

Agent's Code: 13 - 18054

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.



P.O. Box 5077 Sioux Falls, South Dakota 57117-5077
 1-800-331-6053 FAX 1-605-335-0357
 www.cnasurety.com

OFFICE USE ONLY: Use Related Party #13-17385