



**STATE OF SOUTH CAROLINA
OFFICE OF THE SECRETARY OF STATE**

Application/Renewal for Notary Public

IMPORTANT INFORMATION AND INSTRUCTIONS – PLEASE READ:

1. This application is used to apply to become a new notary public and for notaries to renew their notary commission.
2. **Legibly** type or print all information on Page 2 prior to signing in the presence of a notary public. Print and sign your name on Page 2 exactly as you will each time you notarize documents in the future. The printed name and signature must match.
3. The statutory filing fee is **\$25.00 (USD)**, payable to “SC Secretary of State.” Please indicate your payment method on Page 3.
4. Mail **ALL** pages of your application with original signatures to your county legislative delegation office that is listed on Page 5. Your delegation office will review your application, complete Page 4, and then forward your completed application to the Secretary of State’s Office.
5. If you are renewing your notary commission, and if your name and/or home address has changed since the issuance of your current commission, you **must** file the Change in Status form regarding these changes prior to renewing your commission. If your commission has already expired, or you are within 30 days of expiring, you will not need to complete the Change in Status form to change your name and/or address prior to applying to renew your commission. Change in Status forms can be filed through the Online Notary Portal available on our website.
6. You must be a registered voter in South Carolina to become a notary public. If you do not know your voter registration number, you may check it at <https://scvotes.gov/>.
7. Pursuant to S.C. Code of Laws §26-1-90 (K) and (J), a notary public who is not a licensed attorney may not provide a service that would constitute the unauthorized practice of law (UPL). In addition, a notary cannot claim to have powers, qualifications, rights or privileges that a notary does not have. Examples of the unauthorized practice of law include preparation of legal documents, giving legal advice or answering legal questions, and performing a real estate or mortgage loan closing, among other activities.

To learn more about the duties and responsibilities of being a South Carolina Notary Public, please visit the Notaries page of our website for resources, including the South Carolina Notary Public Reference Manual and Notary Webinar.

PLEASE LEGIBLY TYPE OR PRINT

To: Governor of the State of South Carolina

Pursuant to S.C. Code of Laws §26-1-10, I respectfully petition to be appointed as a Notary Public for this State and submit the following information:

Name _____

Home Street Address _____ City _____ Zip Code _____

County _____

****You must be a registered voter at the home address provided on this application.***

Mailing Address _____ City _____ Zip Code _____

****Only if different from home address.***

Last 4 Digits of Social Security # _____ Sex _____ Date of Birth ____/____/____

Voter Registration # _____

****Voter Registration Number may be obtained from your County Voter Registration and Election Office or the State Election Commission.***

Telephone # (_____) _____ - _____ E-mail _____

<input type="checkbox"/> By checking this box, I hereby certify that I can read and write the English language.

OATH OF NOTARY PUBLIC

I do solemnly swear (or affirm) that I am duly qualified, according to the Constitution of South Carolina, to exercise the duties of the office to which I have been appointed and that I will, to the best of my ability, discharge the duties thereof and preserve, protect and defend the Constitution of this State, and of the United States. So help me God.

Print Name

****Exactly as you wish to be commissioned.***

Signature of Applicant

Date

****Exactly as you wish to be commissioned.***

Sworn to and subscribed before me on

This ____ day of _____, 20____

Signature of Notary Public of South Carolina

Printed Name of Notary Public of South Carolina

My Commission Expires _____

NAME OF NOTARY APPLICANT: _____

PLEASE LEGIBLY TYPE OR PRINT

Pursuant to S.C. Code of Laws §26-1-30, the fee for the issuance or renewal of a commission is twenty-five dollars (\$25.00), collected by the Secretary of State.

Please indicate your filing fee payment method below:

1. ☐ Credit/Debit Card

**You must provide both a valid e-mail address and a telephone number below. This may be different from the e-mail and telephone number that is listed on Page 2.*

**A link to a secured payment site will be e-mailed to you once the Secretary of State's Office receives your application from the county legislative delegation office for you to make your credit card payment.*

***DO NOT write your credit/debit card numbers on this application. Please note that a service fee of \$1.43 will be charged by SC.GOV when paying by credit/debit card.**

E-mail Address: _____

Telephone #: (____) _____ - _____

2. ☐ Check

Check # _____

**The Secretary of State's Office accepts personal checks, business checks, and/or cashier's/certified checks. "Starter" checks are not acceptable as the name, account and routing numbers must appear on the checks.*

**Checks must be currently dated, signed, and made payable to the "SC Secretary of State."*

3. ☐ Money Order

Money Order # _____

**Money orders must be currently dated and made payable to the "SC Secretary of State".*

4. ☐ Cash

The Secretary of State's Office advises against placing cash in the mail as it cannot be traced. Therefore, the Secretary of State's Office cannot be held responsible for cash sent via the mail. Please place any cash payments in its own envelope when mailing it with your application. **Also, please note that some legislative delegation offices do not accept cash as payments. Please check with your county legislative delegation office first before using cash as payment for the application fee.*

IMPORTANT NOTE:

If you select either option, #2 (Check), #3 (Money Order), or #4 (Cash), your payment method must be attached to and mailed along with your completed application.

NAME OF NOTARY APPLICANT: _____

*To the Legislative Delegation: Please ensure that your current application endorsement method has been reported to the Secretary of State pursuant to S.C. Code of Laws §26-1-25.

For delegation office use only:

Date received

Check number

FOR LEGISLATIVE DELEGATION USE ONLY:

**This section must be completed by the Legislative Delegation in which you reside. The contact information for each office is located on Page 5.*

We, the _____ Delegation, recommend the appointment of the aforementioned notary applicant.

**Please complete at least one of the three options:*

1)

2)

*Signature of Delegation Chair **OR** Secretary*

Signature of Senator / Senate District # _____

Signature of House Member / House District # _____

3) Signatures of at least half of the present Legislative Delegates from applicant’s county of residence:
