Notary Public Applicant
Oath of Office

This form must be completed and notarized in front of a licensed notary public.

Instructions for the applicant
1. The Notary Public will properly identify you and place you under oath.
2. After the Notary places you under oath, you must:
   • Swear to or affirm that the information in the Oath of Office is true.
   • Print your Notary commission name on the Oath as you would like it to appear on your notary seal/license as allowed in WAC 308-30-030(2). This must match as it appears on your online application.
   • Sign the Oath in front of the Notary with your Notary commission name.
   • Date the Oath in front of the Notary.

Instructions for the licensed notary public
1. Confirm the identity of the applicant and place them under oath.
2. Have the applicant swear to or affirm the information in the Oath of Office.
3. Have the applicant sign and date the Oath of Office.
7. Complete the notarial certificate including county, date, and your signature.
7. Print your name under your signature. Your title is “Notary Public.”
8. Fill in the expiration date for your Notary Public appointment.
9. Affix your stamp or seal in the space indicated.

Failure to follow any of these instructions by you or the Notary will result in the delay of your license.

Oath of Office

I, ____________________________, solemnly swear or affirm under penalty of perjury that the personal information I have provided in this application is true, complete, and correct; that I have carefully read the materials available at the Notary Public website describing the duties of a notary public in and for the state of Washington; and, that I will perform to the best of my ability, all notarial acts in accordance with the law and rules. I have carefully read the questions in the foregoing application and have answered them completely, and pursuant to RCW 9A.72.085, I declare under penalty of perjury under the law of the state of Washington that my answers and all statements made by me herein are true and correct. Should I furnish any false information in this application, I hereby agree that such act shall constitute cause for the denial, suspension or revocation of my appointment as a notary public in the state of Washington.

[Signature]
[Seal or stamp]
[Printed or stamped name]
[Title]
My commission expires ____________________________

Applicant: Print your notary commission name

State of Washington
County of ____________________________

On this day, ____________________________, ____________________________ appeared before me, signed this Oath of Office, and swore (or affirmed) that he/she understood its contents and that its contents are truthful.

[Signature]
[Seal or stamp]
[Printed or stamped name]

Applicant full legal name

[Title]
My commission expires ____________________________