



NOTARY PUBLIC BOND APPLICATION

(Except for Florida Notaries)

Once you complete the application, **e-mail** to uwservices@cnaSurety.com or **fax** it to (605) 335-0357.

For questions, please contact customer service at 1-800-331-6053, M – F 7am – 6 pm CST.

Advise them you are an Alliant Insurance Services, Inc. Client.

State where applying for commission _____ Effective Date _____

Name (as will appear on commission) _____

Home Address _____

City _____ State _____ Zip Code _____

Phone No. _____

County of Appointment _____ Bond Amount _____

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

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

MI Notaries: Date of Birth _____

Phone No. _____

KY Notaries: County or State-At-Large bond needed? _____

Required for a nonresident or County-At-Large bond:

Name of Employer _____

Address _____

City _____ State _____ Zip Code _____

Employer County _____

Name and Corporate Address to Whom Bond and Invoice should be sent:

Attention: _____

Corporate Name: _____

Corporate Address: _____

Corporate Contact

Email Address: _____

Subject to change at any time.

Your CNA Surety Agent is:	
Alliant Ins. Services, Inc., (P) 312-595-8238	
Address Attn: Bond Dept. 353 North Clark St.	
Chicago	IL 60654
<small>City</small>	<small>State Zip</small>
Agent's Code 1 2 — 2 0 8 7 5	

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