

Notary Public Application and Renewal Instructions

1. Carefully **type** or **print legibly** all information requested on the top portion of your application and sign in the presence of a notary public. (*Bottom portion is to be completed by your County Delegation, addresses are listed below.*)
2. Attach a check or money order to your application in the amount of \$25.00 payable to "SC Secretary of State."
3. Mail your application and check/money order to your county delegation office listed below for the required signatures. Your delegation office will forward your application and check/money order to the Secretary of State's Office.
4. **If your county is not listed below, forward your application to: South Carolina House of Representatives PO Box 11867 Columbia, SC 29211 Phone (803) 734-2010.**
5. The Secretary of State's Office will mail your commission certificate within one week upon receipt of a properly executed application.
6. You **must be a registered voter** to become a notary public. If you do not know your voter registration number, call your County Voters Registration Office or County Registration and Election Commission for this information. The number will be listed in the county government section of your local telephone book.

Aiken County Delegation

828 Richland Avenue
Aiken, SC 29801 Phone (803) 642-1694

Anderson County Delegation

PO Box 8002
Anderson, SC 29622 Phone (864) 260-4025

Beaufort County Delegation

PO Box 1267
Beaufort, SC 29901 Phone (843) 470-2565

Berkeley County Delegation

1145 Hwy. 402
Moncks Corner, SC 29461

Charleston County Delegation

P.O. Box 190016
North Charleston, SC 29419-9016 Phone (843) 740-5855

Colleton County Delegation

PO Box 2103
Walterboro, SC 29488 Phone (843) 549-7586

Darlington County Delegation

PO Box 1200
Hartsville, SC 29550 Phone (803) 212-6148

Dillon County Delegation

240 Bermuda Road
Dillon, SC 29536

Edgefield County Delegation

828 Richland Avenue
Aiken, SC 29801 Phone (803) 642-1694

Fairfield County Delegation

PO Box 1006
Winnsboro, SC 29180

Florence County Delegation

180 N. Irby Street, MSC-G
Florence, SC 29501 Phone (843) 665-3044

Georgetown County Delegation

PO Drawer 421270
Georgetown, SC 29442 Phone (843) 545-3029

Greenville County Delegation

301 University Ridge, Suite 2400
Greenville, SC 29601 Phone (864) 467-7105

Horry County Delegation

PO Box 1236
Conway, SC 29528 Phone (843) 915-5130

Jasper County Delegation

PO Box 2433
Ridgeland, SC 29936 Phone (843) 726-6019

Kershaw County Delegation

632 W. DeKalb St., Suite 204
Camden, SC 29020

Lexington County Delegation

205 E. Main Street
Lexington, SC 29072 Phone (803) 785-8184

Marion County Delegation

137 Airport Court, Suite J
Mullins, SC 29574 Phone (843) 423-8237

Marlboro County Delegation

P.O. Drawer 995
Bennettsville, SC 29512

Oconee County Delegation

425 S. Pine Street
Walhalla, SC 29691 Phone (864) 638-4237

Orangeburg County Delegation

PO Box 9000
Orangeburg, SC 29116 Phone (803) 533-6102

Pickens County Delegation

201 S. Fifth St., West End Hall Rm. 205
Easley, SC 29640 Phone (864) 850-7070

Richland County Delegation

PO Box 192
Columbia, SC 29202 Phone (803) 576-1908

Spartanburg County Delegation

366 N. Church Street, Rm. 1210
Spartanburg, SC 29303 Phone (864) 596-2529

Sumter County Delegation

c/o Courthouse, Rm. 103
Sumter, SC 29150 Phone (803) 436-2304

York County Delegation

PO Box 31
Clover, SC 29710

Application/Renewal for Notary Public

For delegation office use only

STATE OF SOUTH CAROLINA
OFFICE OF THE SECRETARY OF STATE
THE HONORABLE MARK HAMMOND

Date received

New _____ Renew _____

To: Governor of the State of South Carolina

I respectfully petition to be appointed Notary Public for this State, and for your information, I herewith submit the following:

Name _____

Mailing Address _____ City _____ Zip Code _____

Home Street Address _____ City _____ Zip Code _____

County _____ Social Security # _____ Sex _____ Date of Birth _____

Voter Registration # _____

(Voter Registration Number may be obtained from your County Registration and Election Office or Voter Registration Office)

Telephone # (_____) _____ E-mail _____

Languages other than English in which fluent _____

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.

Sworn to and subscribed before me

This _____ day of _____, 20_____

Signature of applicant

Date _____

Notary Public of South Carolina

My Commission Expires _____

Mail application to delegation for required signatures (addresses and telephone numbers are on back of application).

This section should be completed by the Legislative Delegation. Please choose one of the three options.

We, the _____ Delegation, recommend the appointment of the above named applicant.
(County)

1) _____ 2) _____
Signature of the Delegation Chairman OR Secretary Signature of Senator / Senate District # _____

Signature of House Member / House District # _____

3) Signed by at least half of the present Legislative Delegates from applicant's county of residence:



STATE OF SOUTH CAROLINA
OFFICE OF THE SECRETARY OF STATE

Notary Division
Post Office Box 11350
Columbia, SC 29211

For Office Use Only
Check # _____
Fee Paid _____

Print Form

(803) 734-2512
(803) 734-1938

**Request for Duplicate Notary Public Commission or
Change of Name of Notary Public**

The applicant is requesting the following:
(Please check the appropriate box or boxes.)
 Duplicate Copy of Notary Public Commission - \$10.00
 Duplicate Copy of Pocket Card - \$2.00
 Notary Public Name Change - \$10.00

COUNTY OF _____

Name on original application _____

IF requesting a name change, enter new name here _____

Present Address _____

City and Zip Code _____ Social Security # _____

Date of Birth _____ EMAIL _____

Voter Registration # _____

Date

Signature of Applicant

Sworn to and subscribed before me this
_____ day of _____ 20____

Notary Public of South Carolina

My Commission expires _____

MAIL REQUEST FORM AND CORRECT FEE TO THE ABOVE ADDRESS