



APPLICATION FOR NOTARY PUBLIC ERRORS & OMISSIONS INSURANCE

INDIVIDUAL POLICY

Name		Phone:	
Address:			
City:		State:	Zip:
Date of Commission:			
Amount of Coverage: <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$25,000 <input type="checkbox"/> \$30,000 <input type="checkbox"/> \$35,000			

Notary Public Errors and Omissions Insurance Price Sheet (Individual Policy)

\$10,000 policy	\$36.10	\$30,000 policy	\$60.16
\$15,000 policy	\$45.05	\$35,000 policy	\$65.75
\$25,000 policy	\$54.10		

Payment Method: <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> Check		
If paying by check, the bond will be issued upon receipt of payment to our office. Check should be made payable to James Stafford Insurance Agency and include overnight delivery fee, if requested, and mail to the following address: James Stafford Insurance Agency P.O. Box 1306 Mount Vernon, TX 75457		
Exact Name as appears on card:		Billing Address:
Card Number (16 Digits)		Card Expiration Date Three Digit Security Code
Method of Deliver: <input type="checkbox"/> Regular Mail (no extra charges) <input type="checkbox"/> Priority Mail (\$8.00 fee) <input type="checkbox"/> Overnight Delivery (\$18.50 fee)		
Authorized Charge Amount (Please include delivery fee if applicable) \$		

Your CNA Surety Agent is:
James Stafford Insurance Agency
 P.O. Box 1306
 Mount Vernon, TX 75457
(903) 567-8500
Toll Free: 1-888-869-4904
 Fax: 1-888-475-4437
 jstafford@bondsonlinetexas.com
Agent's Code: 42 - 22769

Instructions:

1. Complete this application.
2. Once complete, you may send the form by the following methods:
 - a. Mail application with a check for the annual premium to the agents office
 - b. Fax or Email the completed application to our office with credit card information for payment.
3. Once received, your bond is issued on the same day.
4. Your bond is sent to you by regular mail or for an additional fee we can send by overnight delivery.

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.