



***COMPLETE SECTIONS 1-5 AND

FAX TO:

(669)777-6850

FOR PROCESSING****

REQUEST FOR MOBILE NOTARY SERVICE

NOTE: ALL SIGNERS AND DOCUMENTS TO BE SIGNED MUST BE PRESENT WHEN NOTARY PUBLIC ARRIVES. EACH SIGNER MUST PRESENT VALID (UN-EXPIRED) IDENTIFICATION (California Civil Code section 1185(a))

****** MATRICULA CONSULAR ISSUED BY THE MEXICAN CONSULATE AND MEXICO VOTER REGISTRATION CARDS ARE NOT VALID FORMS OF IDENTIFICATION. ******

PRINT LEGIBLY

1. Where is the notary public traveling to?

(SELECT ONLY ONE)

- Home. Address _____ City _____ Zip _____
- Business. Address _____ City _____ Zip _____
- Detention facility(Jail): Name of facility _____ County _____
 Inmate's name _____
 Date of Birth _____ Booking # (if known) _____
- Hospital _____ Address _____
 Patient's name: _____ Room # _____
- Airport _____ Terminal # _____ Airline: _____
- Other: _____

2. Document type? (i.e power of attorney, grant deed, etc.) _____

HAVE YOUR DOCUMENTS PREPARED. NOTARY PUBLIC CANNOT PREPARE DOCUMENTS. CONSULT YOUR ATTORNEY WITH QUESTIONS.

3. Your name _____ Telephone number (_____) _____

REQUESTS WITHOUT CONTACT INFORMATION OR UNVERIFIABLE INFORMATION WILL NOT BE PROCESSED.

4. Is this request for a specific date and time?

- No.** At the earliest convenience.
- Yes.** Date: ___/___/___ Time ____:____ a.m. / p.m. (SUBJECT TO AVAILABILITY)

FEES AND SURCHARGES

(UPON RECEIPT OF YOUR ORDER WE WILL CALL YOU WITH A FEE ESTIMATE FOR THIS SERVICE)

Notary Public Fee: **\$10.00** per signature taken/per document
(Fee regulated by California Government Code section 8211)

Travel Fee: **\$25.00** minimum

After-hours fee: **\$50.00** night calls between 9:00 p.m. and 7 a.m.

Wait time: **\$50.00** per hour starting 15 minutes after scheduled appointment time and billed in 30 minute increments.

5. PAYMENT INFORMATION CREDIT CARD INFO. REQUIRED FOR AFTER-HOURS APPOINTMENTS - PRINT LEGIBLY

Credit card type:

- Visa
- MasterCard
- Discover
- Bill to my account # _____

Credit card number _____ Expiration date ____/____/____ Security code _____

Name as it appears on credit card _____

Billing address _____ City _____ State _____ Zip code _____

I certify that I am the holder of the above credit card and agree to pay for services rendered by TRM FINANCE & NOTARY in connection with this order and according to the card issuer agreement. I further agree to pay TRM FINANCE & NOTARY, the minimum travel fee regardless of service being provided by no fault of TRM FINANCE & NOTARY, its agents, employees or assignees. Fees shall be considered fully earned and non-refundable. This agreement is negotiated in Sunnyvale, California.

Authorized Signature: _____ Date: _____