

# Employer Approval for Alaska Limited Governmental Notary Commission

The Lieutenant Governor may commission Limited Governmental Notaries Public, who are State, municipal or federal employees authorized to use the notary seal for official government business. The term of a Limited Governmental Notary Public commission coincides with the term of government employment.

**1. Applicant Information and statement**

Applicant's Printed Full Name \_\_\_\_\_

I understand that as a Limited Governmental Notary Public I am only allowed to perform notarial services for the official governmental business of my employer for a term that expires with the termination of my employment with this employer.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**2. Name of Employer** \_\_\_\_\_

Employer is (check one):       State Government       Municipal Government       Federal Government

**3. Applicant's Department and Section** \_\_\_\_\_

**4. Name and physical work address (No P.O. Boxes) of the individual who is authorizing issuance of this commission**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Contact information for the individual who is authorizing issuance of this commission**

Email \_\_\_\_\_

Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Fax: \_\_\_\_\_

**6. Statement of Official Purpose**

This commission is needed for the purpose of conducting official government business.

\_\_\_\_\_  
**Signature of the individual who is authorizing issuance of this commission**

# Employer Approval Form Instructions

1. Please print applicant's full name on this line (please use the same name as was printed on line #2 of the application form) and have applicant sign the statement. Applicant is also required to complete and submit the Notary Commission Application Form.
2. Please indicate employer's formal name; "State of Alaska", "U.S. Army", "City of Dillingham", etc., and indicate the type of government entity by checking the appropriate selection.
3. Applicant's department and section; "Dept. of Corrections, Personnel Office", "Water and Sewer Utility, Accounts Receivable Office", etc.
4. Print name and complete physical address of the person who is authorizing the applicant to receive a Limited Governmental Notary Commission. The State requires a signed statement by the applicant's government employer that the commission is need for conducting official business. This person should be a manager or supervisor of the applicant.
5. Personal contact information for the person who is authorizing the applicant to receive a Limited Governmental Notary Commission.
6. The Statement of Official Purpose must be signed by the person who is authorizing the applicant to receive a Limited Governmental Notary Commission.

## Notes:

If the person who authorizes the issuance of this notary commission turns out not to have the authority to do so, the Lieutenant Governor may revoke the notary commission. Revocation of a notary commission may result in a ten year waiting period before the applicant will qualify for another notary commission in Alaska.

For more information about Limited Governmental Notary Commissions please visit our web site at <http://ltgov.state.ak.us/notary/> or contact the office by phone at 465-3509 or by email at [notary@gov.state.ak.us](mailto:notary@gov.state.ak.us)