



APPLICATION FOR REMOTE ONLINE NOTARIZATION SOLUTION PROVIDER

1. Full Name of Company or Organization			
2. Address (number, street, city, state, zip code)			
3. Full Name of Contact Person			4. Title
Telephone	Mobile	Fax	E-mail
5. What is the name of the current version of your remote online notarization solution?			
6. List the states in which your software solution has been approved for use as well as the length of time:			
7. Are you currently registered to do business in the State of Rhode Island?			Yes No
<i>If the solution provider is a business corporation, limited liability company or other entity required to qualify to conduct business with the Rhode Island Department of State, qualification will be required in order for the solution provider to obtain final approval.</i>			
<p>PLEASE RETURN TO: Division of Business Services/Notary 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Fax: (401) 222-1309 Website: www.sos.ri.gov E-mail: notaries@sos.ri.gov</p>			



FOR
SECRETARY OF STATE
USE ONLY

APPLICATION FOR REMOTE ONLINE NOTARIZATION SOLUTION PROVIDER

By signing this application I, _____,
as _____ **(title/position) of** _____ **(name**

of provider) agree to:

1. Comply with the statutes, rules and standards that govern Rhode Island notaries and remote electronic notaries; enable solution to remote notary only during the state of emergency period.
2. Provide a remote online notarization system or solution that complies with the technical specifications and performance standards of the statutes, rules and standards that govern remote online notarization processes and procedures in Rhode Island;
3. Submit changes, modifications, or updates to information previously submitted and approved by the Rhode Island Department of State's office prior to making any updates or subsequent versions of the provider's electronic notarization system available to Rhode Island's electronic notaries;
4. Require notaries to present the Remote Online Notary Certificate of Registration prior to authorizing a remote online notary stamp and signature;
5. Submit an exemplar of the remote online notary signature and remote online notary stamp to the RI Department of State for each electronic notary who subscribes to the provider's electronic notary solution;
6. Suspend the use of any remote online notarization system or solution for any notary whose commission has been suspended, revoked, or expired by the Commissioning Officer;
7. Provide a free and readily available viewer/reader so as to enable all parties relying on the remote/electronic notarized record or document to view the remote notarization video, remote/electronic notary signature and the electronic notary stamp without incurring any cost;
8. Provide additional information upon request to the Rhode Island Department of State for consideration of your application.

By my signature below I, _____,
swear or affirm that I have reviewed all of the statutes and the Rhode Island Department of State's electronic notarization standards and that the system or solution offered complies with all the electronic notarization statutes, rules and standards.

Authorized Signature:

Title:

Date: