

IN THE SUPREME COURT OF GIBRALTAR

APPLICATION FOR REGISTRATION AS PUBLIC NOTARY

Name of Applicant: _____

Qualifications: _____

Place where qualification as Public Notary was obtained (please attach a copy of a document showing the qualification): _____

Address of the premises at which it is intended to practise as a public notary:

Details of the staff it is intended to employ: _____

Please note that if during the year there is a change in staff employed and carrying out notarial duties, this should be notified.

Tel: _____ Email: _____

Date: _____ Signed: _____