**Designation as**

**Authorized**

**Representative**

To contract services for I‐9 Employment Eligibility Verification form review and completion, you must complete the following form and return it via email to our office.

You may return the completed form to: Notary Agent Anna Lane, STAT Notary & Services, LLC.

Email: contact@statnotary.org

If you need emergency service or have any questions, please contact us via phone or text at 706-905-8692

**AGENT AUTHORIZATION/AGREEMENT**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Employer/Company Name) hereby appoints

\_\_Anna Lane\_\_\_ (Agent) as our contracted agent solely for the purpose of Employee Eligibility

Verification for the benefit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Employee

Name).

The Agent's Duties shall be to:

• Examine the original documentation required on the Employment Eligibility Verification I‐9 Form for the

above stated employee;

• Create and/or verify copies of said documentation as required in the I‐9 instructions;

• Record and execute Section 2 of the I‐9 form on our behalf for the benefit of the above-named employee.

We understand that while the Agent may be a commissioned Notary Public, the Agent is not acting in the

role of a Notary Public for the purposes of this agreement, and that verification of the employee's documents

is not a Notarial Act. The Agent is acting as a private citizen and notarization is not required. Further, we

understand that per the USCIS Handbook for Employers (M‐274), we are "responsible for the contractor’s

actions and are liable for any violations of the employer sanctions laws" that may arise.

A copy of this agreement signed by both parties shall be returned and kept with the I‐9 form on file with the

Employer.

Authorized by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby accept my appointment as Agent, as described above.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_