



Division of Licensing Services

New York State
Department of State
Division of Licensing Services
Apostille and Authentication Unit
One Commerce Plaza
99 Washington Avenue
Albany, NY 12231-0001
www.dos.ny.gov

Apostille/Certificate of Authentication Request

Attach this form to your documents. Please print or type.

Country documents will be used in: _____ Number of documents to be authenticated/apostilled: _____

Requestor's Name: _____

Name of Firm/Organization (If applicable): _____

Address: _____

Daytime telephone number: _____ Email address: _____

Fees/Payment: (Checks/Money Orders must be payable to N.Y.S. Department of State)

Number of documents: _____ X \$10.00 per document = Total Due: _____

Form of Payment Enclosed or Authorized:

Check drawn on U.S. bank

Money Order from a U.S. bank

Credit/Debit Card - **Accepted in Albany Office Only:** MasterCard Visa American Express

Name as it appears on Card: _____

Billing Address: _____ City: _____ State: _____ Zip Code: _____

Card Number: _____ Expiration: _____

Payment Authorization; I authorize the New York Department of State to charge my credit/debit card for the amount due for the authentication services provided by the Department of State.

Cardholder's Signature: _____ Date: _____

If the name on the credit card or debit card is in the name of a corporation or other business entity, please print the signer's name: _____

Type of Return Mailer Enclosed: (You must enclose one of the following if documents are to be returned to you by mail. Not applicable for in-person deliveries.)

Self-addressed, First-Class envelope with postage

Self-addressed US Postal Priority or Express envelope with postage

Self-addressed carrier label; (FedEx, UPS, Airborne, or DHL)

Location for Mailed Requests and In-Person Deliveries:

Division Licensing Services
Apostille and Authentication Unit
99 Washington Avenue, 6th Floor
Albany, NY 12231-0001

Location for In-Person Deliveries ONLY:

Credit Cards not accepted at this location

Division of Licensing Services
123 William Street, 2nd Floor
New York, NY 10038

For Department of State Use Only

Transaction # _____ Date Processed: _____ Cash Receipt # _____

Apostille 210 210cc 210de 260 262

Number of documents: _____ Special Deputy: _____ County: _____