



**ASSEMBLY STANDING COMMITTEE ON GOVERNMENTAL OPERATIONS
ASSEMBLY STANDING COMMITTEE ON CONSUMER AFFAIRS AND PROTECTION
ASSEMBLY STANDING COMMITTEE ON BANKS
ASSEMBLY STANDING COMMITTEE ON JUDICIARY**

NOTICE OF PUBLIC HEARING

SUBJECT: Electronic and Remote Notarization in New York State

PURPOSE: To examine the impact of authorizing licensed notaries public to conduct notarizations through electronic or remote methods.

Friday, May 7, 2021

10:00 AM

<https://www.nyassembly.gov/av/live/>

A wide variety of professions and government entities use notarization as an essential tool for document authentication. For many years notarizations have been completed in person. However, during the COVID-19 pandemic it has become difficult to conduct business safely in person. As a result, the governor issued an executive order authorizing notarizations to be done through a remote process. Currently, there are several pending legislative proposals that aim to authorize electronic or remote notarization. This hearing will bring together various stakeholders to discuss the impact of authorizing licensed notaries public to conduct notarizations through electronic or remote means.

Persons wishing to present pertinent testimony to the Committees at the above hearing should complete and return the enclosed reply form as soon as possible. It is important that the reply form be fully completed and returned so that persons may be notified in the event of emergency postponement or cancellation.

Oral testimony will be limited to five minutes' duration. In preparing the order of witnesses, the Committees will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible.

Written testimony should be submitted via email two days prior to the hearing.

Attendees and participants at any legislative public hearing should be aware that these proceedings are video recorded. Their likenesses may be included in any video coverage shown on television or the internet.

In order to further publicize these hearings, please inform interested parties and organizations of the Committees' interest in hearing testimony from all sources.

In order to meet the needs of those who may have a disability, the Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), has made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.

Kenneth Zebrowski
Member of Assembly
Chair
Committee on Governmental Operations

Nily Rozic
Member of Assembly
Chair
Committee on Consumer Affairs and Protection

Victor Pichardo
Member of Assembly
Chair
Committee on Banks

Charles Lavine
Member of Assembly
Chair
Committee on Judiciary

PUBLIC HEARING REPLY FORM

Persons wishing to present testimony at the public hearing on Electronic and Remote Notarization are requested to complete this reply form as soon as possible and email it to:

Brian Williams
Legislative Analyst
Assembly Committee on Governmental Operations
Email: williamsb@nyassembly.gov
Phone: (518) 455-4355

- I plan to attend the following public hearing on Electronic and Remote Notarization to be conducted by the Assembly Committees on Governmental Operations, Consumer Affairs and Protections, Banks, and Judiciary on May 7, 2021.
- I plan to make a public statement at the hearing. My statement will be limited to five minutes, and I will answer any questions which may arise. I will provide copies of my prepared statement.
- I will address my remarks to the following subjects:

- I do not plan to attend the above hearing.
- I would like to be added to the Committee mailing list for notices and reports.
- I would like to be removed from the Committee mailing list.
- I will require assistance and/or handicapped accessibility information. **Please specify the type of assistance required:**

NAME:

TITLE:

ORGANIZATION:

ADDRESS:

E-MAIL:

TELEPHONE:

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