



Reduction Operator Renewal Application

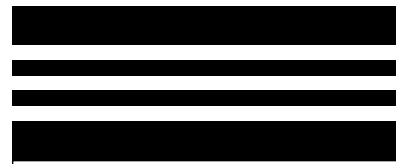
Renew an operator license to perform cremations, alkaline hydrolysis, and natural organic reduction.

Mail these to the address below:

- this completed form
- a check or money order payable to Department of Licensing for the **nonrefundable** fees
- a certificate of completion of operator training (*if 5 years since last certified*)

**Funeral and Cemetery Board
Department of Licensing
PO Box 35001
Seattle, WA 98124-3401**

For questions or language help call: 360-664-1822



Fees

Crematory Operator [21708]—**\$135**

Alkaline Hydrolysis Operator [21709]—**\$135**

Natural Organic Reduction Operator [21710]—**\$135**

\$5 each. DOL print and mail license. Quantity_____ Total \$_____

Applicant

TYPE or PRINT Name as you would like it to appear on your license		License number	
Full legal name (<i>First, Middle, Last</i>)			
Address			
City		State	ZIP code
Mailing address, if different			
City		State	ZIP code
10-digit phone number		Email	
Training certificate You are required to recertify and provide a copy of your operator training certificate every 5 years at renewal. Do you have a current certificate of completion of operator training?			
		Yes	No
Legal background Answer the questions below. If you answer "Yes," attach a detailed explanation.			
1. Within the last 5 years, in this state or any other jurisdiction, have you had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you?		Yes	No
2. Within the last 5 years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic convictions.)		Yes	No

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

_____	TYPE or PRINT Name
_____	X
_____	Signature
_____	Date and place

Providing any false information in this application may be cause for denial, suspension, or revocation of your professional license in the state of Washington.