



# Reduction Facility Operator Application

Apply for an operator license to perform cremations, alkaline hydrolysis, and/or 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

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

For questions or language help call: 360.664.1555



### Fees

- Crematory Operator [21708]—\$182
- Alkaline Hydrolysis Operator [21709]—\$182
- Natural Organic Reduction Operator [21710]—\$182
- \$5 each. DOL print and mail license. Quantity \_\_\_\_\_ Total \$ \_\_\_\_\_

### Applicant

TYPE or PRINT Name as you would like it to appear on your license		Social Security number*	
Full legal name (First, Middle, Last)		Date of birth	
Address			
City		State	ZIP code
Mailing address, if different (Street address or PO Box, City, State, ZIP code)			
10-digit phone number		Email	
Military? (check if applicable) Current or former: <input type="checkbox"/> Military member <input type="checkbox"/> Military spouse or domestic partner			
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? ..... <input type="checkbox"/> Yes <input type="checkbox"/> 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.) ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			

\*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

*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.**