WASHINGTON STATE DEPARTMENT OF

Auctioneer Registration Application

For questions or language help call: 360-664-6636

Apply online: https://professions.dol.wa.gov

Or mail this completed form, surety bond information, and financial certification affidavit with a check or money order (payable to the Department of Licensing) to:

Auctioneer/Auction Company Program Department of Licensing PO Box 35001 Seattle, WA 98124-35001

20201-APPLICATIONS

You need an auctioneer license if:

- You are calling bids
- Or you are arranging or managing auctions and you are a sole proprietor whose sales do not exceed \$25,000.

You need an auction company license if:

- You are arranging or managing auctions and you are a sole proprietor whose sales exceed \$25,000
- Or you are not a sole proprietor and you are arranging or managing auctions.

Note: You can't call bids with an auction company license.

Surety bond requirements:

Auctioneer: \$5,000 surety bond

Auction company: the amount you need depends on the gross value of the goods you sell in Washington State:
For existing companies, your gross sales during the previous calendar year (see table below)

· For new companies, an estimate of your gross sales during the current calendar year

Gross sales	Bond/security amount
Gross sales \$0.00 to \$24,999.99	\$ 5,000
\$25,000 to \$49,999.99	
\$50,000 to \$99,999.99	\$15,000
\$100,000 to \$499,999.99	\$20,000
\$500,000 and above	

Application type (check one)

- New application \$171
- Renewal \$171
- Late renewal-\$281

Licenses are available for self-printing with an online account.

- If you want us to print and mail your license add a \$5 print fee for each copy to your payment.
- \square \$0 self-print license online.
- □ \$5 each. DOL print and mail license. Quantity_____ Total \$_____

Applicant information

TYPE or PRINT Name of auctioneer as you would like it to appear on your license					
Full legal name <i>(First, Middle, Last)</i>					
Mailing address					
City State ZIP code County					
(Area code) Phone number Date of birth (mm/dd/yyyy) Social Security number* Email					
Military (check if applicable) Current or former:	/ilitary member □ M	ilitary spouse c	or register	ed domestic pa	Irtner

*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 a SSN, ITIN, or TIN, 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).

Business information-

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tor applicants that will also be	arranging or manag	na alletione sole nr	onrietore or	nartherenine only
for applicants that will also be	an any ny or manag	ng ductions, sole pr	oprictor 3, or	paranersinps only

Business name	Email		
Physical location address			
City	State	ZIP code	County
Mailing address		I	
City	State	ZIP code	County
(Area code) Business phone number	UBI/UBI Bus	siness ID/UBI Locat	ion ID (16 digits)
Type of business Sole proprietor Partnership	I		

Financial Guarantee

Choose one				
Choose only one of the following options:				
□ 1. New applicant for auction com	pany who arranges and manages au	ctions.		
I have not been licensed as an auction company in Washington State. During the current calendar year, the total estimated gross value of goods and/or real estate to be sold in Washington State will be \$				
Please include the auction con				
	who arranges and manages \square Sole			
	past calendar year (January 1 throug			
	state sold by me in Washington State	e was \$		
\Box 3. New application or renewal for auctioneers who calls bids only.				
Surety bond company name				
Surety bond number	Effective date	Is the surety bond continuous?		
		🗌 Yes 🔲 No		
Expiration date (if not continuous)	Surety bond amount			
	\$			

Legal background-all applicants

Answer the following 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?	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.)	No

Certification

Answer the following	
1. Do you certify that any proceeds received and not paid to clients within 24 hours will	
be deposited no later than the next business day in a trust account located in this state	
and maintained in accordance with RCW 18.11.230?	🗌 No
2. Have you read and do you agree to follow all the applicable laws and rules of this	
procession and do you understand the penalties for misconduct?	🗆 No

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

TYPE or PRINT Name	
Signature	

Date and place

Sig

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

Notarization/Certification-auction company only

	n and that I am authorized to	peing first duly sworn, depose and say that I am the sign for the partnership, corporation, or LLC (if siness in this state will be properly licensed.
		Authorized signature
		Date and place
	State of	, County of
	Signed or attested be	efore me on by
(Seal or stamp)		X
		Signature
		Printed or stamped name
	Title	Expiration date of appointment



Auctioneer Surety Bond

 \Box Sole proprietor \Box Partnership \Box Corporation \Box LLC

Know all persons by these presents: That _____

doing business as

Applicant/Owner

Business name

a corporation organized and existing under the laws of the State of

and authorized to transact surety business in the State of Washington, as Surety, are held and firmly bound unto the State of Washington in the sum of _______ dollars lawful money of the United States of America to be paid to the said State of Washington, for which payment well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

and/or

The condition of the above obligation is such that: Whereas, the said principal has made application for an Auctioneer/Auction company license by the Business and Professions Division of the State of Washington for carrying on the business of Auctioneering within the State of Washington; and is required by Chapter 18.11 RCW to furnish a bond in the penal sum of ______ dollars with good and sufficient surety, conditioned as required by said law.

Now, therefore, If the said principal will comply with all the provisions of Chapter 18.11 RCW of the State of Washington and with all rules and regulations adopted by the Director of the Department of Licensing, of said state pursuant to the provisions of Chapter 18.11 RCW and will pay all amounts that may be adjudged against principal by reason of violation of Chapter 18.11 RCW or any rules or regulations adopted pursuant thereto in the conduct of principal's business as an Auctioneer/Auction Company then the above obligation shall be null and void; otherwise to remain in full force and effect.

Provided: That any person having a claim against the principal for damage as a result of any violation by principal or his/her agent of Chapter 18.11 RCW or any rules or regulations adopted pursuant thereto may bring a suit on this bond in the Superior Court of the County in which the principal's business is located, or of any county in which jurisdiction of the principal may be had.

Provided further: That the aggregate liability of the Surety hereunder for any and all claims presented shall not exceed the penal sum of this bond. Provided further: That the Business and Professions Divisions shall be notified 30 days prior to the cancellation of this bond, along with the reason for cancellation or termination. No bond filed shall be approved unless it expressly provides that it will be effective for one year following the effective date of its cancellation or termination, whether because of expiration, suspension, or revocation of the license, or otherwise, as to any covered act or acts and omission or omissions of the licensee occurring on, or prior to, the effective date of cancellation or termination.

In witness whereof, the said principal and the said surety have affixed their hands and seal this

day of	, 20
	Effective date of bond
	Bond number
Signature of principal	Surety
X	Name
Signature of applicant/owner or individual authorized to sign for partnershi	ip or corporation Attorney-in-Fact
(Surety seal)	Agency name
	Resident agent
	Address