WASHINGTON STATE DEPARTMENT OF LICENSING

Change of Principal Private Investigation Agency Application

[redacted]

29912-APPLICATIONS

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

Or mail this completed form with a check or money order (payable to the Department of Licensing, to:

Private Investigator Program
Department of Licensing
PO Box 35001
Seattle WA 98124-3401

For questions or language help call: 360-664-1843

Fees

☐ Change of unarmed principal – **$150**
☐ Change of armed principal – **$150**

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.
☐ $0 self-print license online.
☐ $5 each. DOL print and mail license. Quantity_____ Total $_____

Agency information

Type or Print UBI/UBI Business ID/UBI Location ID (16 digits)	Agency name	
Type of business (check one) ☐ Sole proprietor ☐ Partnership ☐ Corporation ☐ Foreign corporation		Number of partners (if partnership)
Agency address (street address in Washington state)		
City	State WA	ZIP code
10-digit agency phone number	Agency email	
Agency mailing address (if different)		
City	State	ZIP code

Applicant information

Type or Print Name (Last, First, Middle initial)		
Social Security number*	Date of birth (mm/dd/yyyy)	Citizenship ☐ U.S. citizen ☐ Resident alien
Mailing address		
City	State	ZIP code
10-digit phone number	Email	
Military? (check if applicable) Current or former: ☐ Military member ☐ Military spouse or domestic partner		
Requirement under which you will be qualifying for license: (check one) ☐ Three years of experience in private investigation or a related field (see RCW 18.165.050) ☐ Examination (see next page)		

*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).

Continued on next page.

Legal background

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? . . . . . ☐ 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

Fingerprinting

All private investigators must have fingerprint-based background checks. For information about the fingerprinting and background check process, go to https://dol.wa.gov/professional-licenses/fingerprinting-and-background-checks.

Applicant authorization and certification

Do you authorize any business associates (past and present) and any government agencies (local, state, or federal) to release any information, files, or records which may be required for a background investigation to the Department of Licensing? . . . . . ☐ Yes ☐ No

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

TYPE or PRINT Name

Date and place (city or county) signed

X **When completed, print form and sign here.**

Applicant signature

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