WASHINGTON STATE DEPARTMENT OF LICENSING

Private Investigator License Renewal

[redacted]

29912-RENEWAL

Renew a private investigator license. Do not use this form if you are a Qualified Agent or Principal for a Private Investigator Agency. Go to www.dor.wa.gov to renew your Private Investigator Agency license.

Online: https://professions.dol.wa.gov.

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

Public Protection Services
Department of Licensing
PO Box 35001
Seattle, WA 98124-3401

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

Fees

- ☐ Association–$25 (in addition to renewal fee if due)
- ☐ Renewal–$193
- ☐ Late renewal–$228
- ☐ Certified trainer endorsement renewal–$15 (in addition to renewal fee)

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 $ _____

Applicant information

TYPE OR PRINT Name as you would like it to appear on your license			Professional license number
Full legal name (First, Middle, Last)			
Social Security number*	Date of birth (mm/dd/yyyy)	Citizenship ☐ U.S. citizen ☐ Resident alien	
Physical location address			
City		State	ZIP code
Mailing address (if different)			
City		State	ZIP code
10-digit phone number	Email		

*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).

Signature required 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

By completing this application, 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.

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

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

Applicant signature

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

Employer information

Agency name			
Private investigative agency license number (not UBI)			
Agency address (street address as it appears on the license)			
City		State	ZIP code
10-digit agency phone number	Agency email		