



## Private Investigator Association Request

Add a private investigator with an active license to your agency.  
You can also request their license renewal at the same time.

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

Or mail this form, any required attachments, and a check or money  
order for the fees (payable to the Department of Licensing) to:

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



For questions or language help: call 360-664-1843 or email [security@dol.wa.gov](mailto:security@dol.wa.gov)

### Important:

- This form must be signed by the employee and the agency representative.
- The private investigator agency must provide the agency license number.

### Fees

- ☐ Add a private investigator—**\$25**
- ☐ Armed endorsement—**additional \$110**
- ☐ Renew my employee's license—**\$193**

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 Agency name		Private investigator agency license number	
Street address as it appears on your license			
City		State	ZIP code
10-digit phone number	Email		
UBI/UBI Business ID/UBI Location ID (16 digits)			
Mailing address (if different than above)			
City		State	ZIP code

Date

Title of signee

X

Company representative signature

## Employee information

TYPE OR PRINT Name as you would like it to appear on your license		Private investigator license number	
Full legal name (First, Middle, Last)			
Social Security number*		Date of birth (mm/dd/yyyy)	
Residence address			
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			

\*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).

## 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? ..... <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	

**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
_____	X
Date and place (city or county) signed	Employee signature

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