

Private Security Guard LICENSING Company/Qualifying Principal **License Application**

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 Security Guard Program Department of Licensing PO Box 35001 Seattle WA 98124-3401



For questions or language help call: 360-664-6611

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 \$ ____

Application type

Company with principal - \$364 Change of principal - \$80

Company information	on						
UBI/UBI Business ID/UBI Location ID (16 digits)			Company name				
Type of business (check one)			'		Numb	er of partners if partnership	
Sole proprietor	Partnership	Corpo	oration	Foreign corporatio	n		
Company address (street addre	ss in Washington state	e)					
City					State WA	ZIP code	
10-digit phone number	Company	/ email					
Company mailing address (if di	fferent)						
City					State	ZIP code	
Location address (Street, city, s	state, ZIP code)						
Location address (Street, city, s	state, ZIP code)						

To show additional branches, attach pages.

Type or Print Name (Last, First,	Middle initial)						
Social Security number*		Date of birth (mm/dd/yyyy)		Citizenship			
				U.S. citizen Resi		Resident alie	
Address							
City				State	ZIP code	Э	
0-digit home phone number	Ema	ail					
filitary? (check if applicable)							
Current or former: M	ilitary mem	nber Military spouse or do	mestic par	tner			
1. A copy of the military							
A license that is in go a. During application Standing from each b. There may be cont	review, DC n state. inuing edu	ng in all states where the indivi- OL may request an original Celucation requirements needed for you hold a license issued by an	rtification o	of Licensurecognize	ire or Le	etter of Good ense.	
A license that is in go a. During application Standing from each b. There may be cont	review, DC n state. inuing edu	OL may request an original Ce	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	etter of Good ense.	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in goa. During applicationStanding from eachb. There may be cont3. Complete the following	review, DC n state. inuing edu	OL may request an original Celucation requirements needed for	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in go a. During application Standing from each b. There may be cont 3. Complete the followin State	review, DC n state. inuing edu ng table if y	DL may request an original Cellication requirements needed for you hold a license issued by an License Number	rtification of or DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton).	
2. A license that is in go a. During application Standing from each b. There may be cont 3. Complete the followin State State	review, DC n state. inuing edu ng table if y be qualifying f nce as a m	DL may request an original Celucation requirements needed for you hold a license issued by an License Number License Number for license: (check one) nanager, supervisor, or administration of the control of the contro	rtification of DOL to ny state (e	of Licensurecognize	re or Le the lice Washing	ense. gton). on Date	

Legal background

Yes	No
Yes	No

Fingerprinting

All security guards must have fingerprint-based background checks. You must apply and obtain an application number prior to submitting fingerprints. For information about the fingerprinting and background check process, go to dol.wa.gov/professional-licenses/fingerprinting-and-background-checks.

To check the status of your application go to: https://professions.dol.wa.gov

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 perjur	y under the law of Washington that the foregoing is true and correct.
	TYPE or PRINT Name
	X
Date and place signed	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.