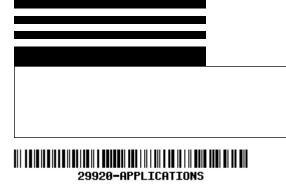


Bail Bond Recovery Agent License Application

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:

Bail Bonds Program
Department of Licensing
PO Box 35001
Seattle, WA 98124-3401



For questions or language help call: 360-664-1809

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Bail bond recovery agent license-\$490	
Endorsement to bail bond agent license-\$100	
License number	
Licenses are available for self-printing with an online account.	
If you want us to print and mail your license add a \$5 print fe	ee for each copy to your payment.
\$0 self-print license online.	
\$5 each. DOL print and mail license. Quantity To	otal \$

Applicant information

TYPE or PRINT Name as you would	like it to appear on your lice	ense		
Full legal name (Last, First, Middle)				
Social Security number*	Date of birth ((mm/dd/yyyy)	Citizenship U.S. citiz	zen Resident alien
Street address	,			
City			State	ZIP code
10-digit home phone number	Email		·	
Mailing address (if different)				
City			State	ZIP code
Concealed Pistol License (CPL) number	per	CPL expiration date		
Military? (check if applicable)				
Current or former: Milita	ary member Mil	itary spouse or domestic p	artner	
		en a Service member and gnize their current license		
 A copy of the military of 	orders with this appli	ication;		

^{*}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).

Applicant information (continued)

- 2. A license that is in good standing in all states where the individual held their license before.
 - a. During application review, DOL may request an original Certification of Licensure or Letter of Good Standing from each state.
 - b. There may be continuing education requirements needed for DOL to recognize the license.
- 3. Complete the following table if you hold a license issued by any state (excluding Washington

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Mandatory training certification

	<u> </u>		
Answ	er the following		
1.	Have you taken the required 32 hours of pre-license training and can you provide this documentation upon request?	Yes	No
2.	Have you completed the required training for Taser, Baton-expandable, straight stick or side-handled and Oleo Capsicum (OC) resin sprays or foams within the last 12 months and can you provide this documentation upon request?	Yes	No
3.	Have you received a firearms certification issued through the Criminal Justice Training Commission for your Bail Bond Recovery Agent profession if you will be carrying a firearm during the course of your duties and can provide this documentation upon request?	Yes	No
		163	110
4.	Do you have a high school diploma or GED or have 3 years experience in the bail industry and can you provide documentation upon request?	Yes	No

Legal background

Answer the following		
Answer the questions below. If you answer "Yes," attach a detailed explanation.		
 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
 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
	 Answer the questions below. If you answer "Yes," attach a detailed explanation. 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? 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 	 Answer the questions below. If you answer "Yes," attach a detailed explanation. 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?

Fingerprinting

All bail bond recovery agents 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.

Applicant signature-Sign and date the declaration below.

By completing this application, I 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
Applicant signature
Date and place (City or County) signed

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