

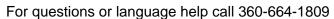
Bail Bond Agent License Renewal

Use this form to renew your Bail Bond Agent License.

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





Fees

Renewal – \$615 Late renewal penalty – \$650 Association fee – \$25

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		Date of birth (mm/dd/yyyy)		
Full legal name (First, Middle, Last)				
Residence address				
City		State	ZIP code	
10-digit phone number	Social Security number*	Profess	sional license number	
Answer the following 1. Do you have an active Surety Produ Commissioner with all affiliations up				
2. Which type of bonds will you be positive the property: Provide the names of earthe placing of property bonds only. If you need more room, attach a second	ach court that has given approval f		Surety Property	

^{*}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

Date and place (City or County) signed

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) government agencies (local, state or federal) to release any information, files, or records verquired 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 corn	ect.	

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

TYPE or PRINT Name

Applicant signature