

## **Auctioneer Registration Application Instructions**

- 1. Complete in detail the Application for Registration as an Auctioneer.**
- 2. Attach the appropriate fee payable to the Washington State Treasurer.**
- 3. Complete and return the enclosed surety bond for five thousand dollars (\$5,000.00).**
  - Notarize, sign the surety bond, and confirm that the surety bond seal is affixed before mailing.
  - If gross sales exceed \$25,000.00 during any one calendar year, an auction company license is required.
- 4. Complete and return the Financial Certification Affidavit (attached).**
- 5. Return completed application and supporting documents to:**

Department of Licensing  
Auctioneer Section  
PO BOX 9048  
Olympia, WA 98507-9048  
  
dol.wa.gov

**If you do not have a Revenue Tax Number/Unified Business Identifier (UBI) number, please contact the Department of Revenue at 1-800-647-7706, or the Department of Licensing's Master License Service at (360) 664-1400.**

***Upon Filing, This Application Becomes a Public Record and is  
Subject to Public Disclosure Provisions Under RCW 42.56***

# Auctioneer Registration Application

AUCTIONEER SECTION  
 P.O. BOX 9048  
 OLYMPIA, WA 98507-9048  
 dol.wa.gov

**Fee: \$155.00**

Make remittance payable to State Treasurer.  
 Send this application with your remittance to:  
 Department of Licensing  
 PO Box 9048  
 Olympia, WA 98507-9048

FOR VALIDATION ONLY

001-070-202-0000

## Applicant Information

Please type or print clearly in dark ink

Applicant Name _____		
<small>LAST</small>	<small>FIRST</small>	<small>MIDDLE</small>
Address _____		Residence Telephone No. ( ) _____
<small>PO BOX/STREET</small>		
City _____	State _____	Zip _____ County _____
Check one: <input type="checkbox"/> Resident <input type="checkbox"/> Non-resident from _____		
<small>STATE</small>		
Gender (F or M) _____	Date of Birth _____	Social Security No. _____
	<small>MONTH DAY YEAR</small>	<small>REQUIRED PER RCW 26.23.150</small>
Business Name _____		
Business Address _____		Business Telephone No. ( ) _____
<small>PO BOX/STREET</small>		
City _____	State _____	Zip _____ County _____
Washington Corporation No. _____	WA Revenue Tax No. _____	
<small>IF APPLICABLE</small>	<small>UNIFIED BUSINESS IDENTIFIER (UBI)</small>	
Trust Account: _____ / ( ) _____ / _____		
<small>NAME OF BANK</small>	<small>AREA CODE</small>	<small>TELEPHONE NO.</small>
		<small>TRUST ACCOUNT NO.</small>
<p><b>Proceeds received and not paid to clients within 24 hours must be deposited no later than the next business day in a trust account located in this state (RCW 18.11.230).</b></p> <p><b>Type of Business:</b> <input type="checkbox"/> <b>Sole Proprietor</b>    <input type="checkbox"/> <b>Partnership</b>    <input type="checkbox"/> <b>Corporation</b>    If you checked partnership or corporation, attach one copy of the partnership agreement or the current corporation document.</p>		

## Applicant Personal Data

1. Have you been convicted of a crime, misdemeanor or felony in this state, any other state, by the federal government, or any other jurisdiction within the past ten years?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
2. Is there a criminal complaint, accusation, or information presently pending against you or are you currently under indictment in this state, any other state, by the federal government, or any other jurisdiction?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
3. Has any professional or occupational license, certification or permit held by you, been fined, suspended, revoked, refused or denied in this state, any other state, by the federal government or any other jurisdiction?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
4. Have you ever had a civil court order, verdict, or judgement entered against you in any court of competent jurisdiction in this state, any other state, the federal government, or any other jurisdiction?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<p><b>Please attach a letter of explanation for any Yes answers to the questions above, including charge(s), date of conviction, civil judgment or order, county jurisdiction, state, and disposition of charges</b></p>	

Under RCW 9A.72.085, I declare under penalty of perjury under the law of the state of Washington that the foregoing is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Applicant Signature **X** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

<b>OFFICE USE ONLY</b>
Comments _____
_____



## Auctioneer or Auction Company Surety Bond

Sole Proprietor     Partnership     Corporation

KNOW ALL PERSONS BY THESE PRESENTS: That \_\_\_\_\_  
*APPLICANT/OWNER*

doing business as \_\_\_\_\_  
*BUSINESS NAME*

as Principal, at the following address \_\_\_\_\_ and/or  
*BUSINESS ADDRESS*

a corporation organized and existing under the laws of the State of \_\_\_\_\_  
and authorized to transact surety business in the State of Washington, as Surety, are held and firmly bound unto the STATE OF WASHINGTON in the sum of \_\_\_\_\_ Dollars lawful money of the United States of America to be paid to the said State of Washington, for which payment well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT: Whereas, the said principal has made application for an Auctioneer/Auction Company license by the Business and Professions Division of the State of Washington for carrying on the business of Auctioneering within the State of Washington; and is required by Chapter 18.11 RCW to furnish a bond in the penal sum of \_\_\_\_\_ Dollars with good and sufficient surety, conditioned as required by said law.

NOW, THEREFORE, If the said principal will comply with all the provisions of Chapter 18.11 RCW of the State of Washington and with all rules and regulations adopted by the Director of the Department of Licensing, of said state pursuant to the provisions of Chapter 18.11 RCW and will pay all amounts that may be adjudged against principal by reason of violation of Chapter 18.11 RCW or any rules or regulations adopted pursuant thereto in the conduct of principal's business as an Auctioneer/Auction Company then the above obligation shall be null and void; otherwise to remain in full force and effect.

PROVIDED: That any person having a claim against the principal for damage as a result of any violation by principal or his/her agent of Chapter 18.11 RCW or any rules or regulations adopted pursuant thereto may bring a suit on this bond in the Superior Court of the County in which the principal's business is located, or of any county in which jurisdiction of the principal may be had.

PROVIDED FURTHER: That the aggregate liability of the Surety hereunder for any and all claims presented shall not exceed the penal sum of this bond. PROVIDED FURTHER: That the Business and Professions Divisions shall be notified 30 days prior to the cancellation of this bond, along with the reason for cancellation or termination. No bond filed shall be approved unless it expressly provides that it will be effective for one year following the effective date of its cancellation or termination, whether because of expiration, suspension, or revocation of the license, or otherwise, as to any covered act or acts and omission or omissions of the licensee occurring on, or prior to, the effective date of cancellation or termination.

IN WITNESS WHEREOF, the said principal and the said Surety have affixed their hands and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Effective Date of Bond \_\_\_\_\_

Bond Number \_\_\_\_\_

SIGNATURE OF PRINCIPAL

SURETY \_\_\_\_\_

\_\_\_\_\_  
*SIGNATURE OF APPLICANT/OWNER OR INDIVIDUAL AUTHORIZED TO SIGN FOR PARTNERSHIP OR CORPORATION*

Name \_\_\_\_\_

Attorney-in-Fact \_\_\_\_\_

(SURETY SEAL)

Agency Name \_\_\_\_\_

Resident Agent \_\_\_\_\_

Address \_\_\_\_\_

## Auctioneer/Auction Company Financial Certification Affidavit

NAME ( <i>Print</i> )		COMPANY NAME		AUCTIONEER/AUCTION CO. LICENSE NO.	
BUSINESS ADDRESS			CITY	STATE	ZIP CODE
HOME ADDRESS			CITY	STATE	ZIP CODE
BUSINESS TELEPHONE NO. (       )		HOME TELEPHONE NO. (       )		SOCIAL SECURITY NO. ( <i>Required per RCW 26.23.150</i> )	

**1.  New Applicant**

I have not been licensed as an auctioneer/auction company in Washington state. During the next 12 month period, the total **Estimated Gross** value of goods and/or real estate to be sold will be \$ \_\_\_\_\_

**Please include the auctioneer/auction company surety bond.**

**2.  Corporation                       Partnership                       Sole Proprietorship**

This is to certify that during the past calendar year (January 1 through December 31) the total gross value of all goods and/or real estate sold by me was \$ \_\_\_\_\_

**3.  Licensed Auctioneer**

This certifies that I have been employed by the following auction company(ies) during the past calendar year, January 1 through December 31:

*Attach additional pages if necessary.*

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_ Co. Telephone No. (       ) \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_ Co. Telephone No. (       ) \_\_\_\_\_

According to WAC 308-11-050 and based upon the above declaration, my bond/trust account is in the amount of

\$ \_\_\_\_\_, and has been issued by \_\_\_\_\_,

INSURANCE COMPANY/PUBLIC DEPOSITORY

\_\_\_\_\_ whose agent is \_\_\_\_\_.

ADDRESS

NAME

Pursuant to RCW 9A.72.085, I declare under penalty of perjury under the law of the state of Washington that the foregoing is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Applicant's Signature **X** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_