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WASHINGTON STATE DEPARTMENT OF LICENSING

Scrap Metal Business Bond

Scrap metal businesses use this form when a bond is required for licensing.
Send this completed form to:
Business Licensing Service, Department of Licensing, PO Box 9034, Olympia WA 98507

Type of bond (*check one*):
☐ Scrap metal processor
☐ Scrap metal recycler

Business information

Bond number	
Legal entity name and Doing Business As (DBA) name	
City of business location	State

Bonding agent information *(if known)*

Name of bonding agent		(Area code) Telephone number
Address		
City	State	ZIP code

Bonding company information

Name of bonding company		(Area code) Telephone number
Address		
City	State	ZIP code

The bonding company organized and existing under the laws of the state of _____ and authorized to transact business in the state of Washington, as surety, are held and firmly bound to a bond in the amount of $10,000 to be paid to the state of Washington. The conditions the principal, bonding company and the state of Washington agree to by taking out this bond are as follows:

1. As a precondition to receiving and maintaining a license, the license holder must keep this bond in full force and effect. If any cancellation, revocation, or withdrawal by the surety/bonding company occurs, or if the entire bond amount is exhausted, the Department will terminate the license until such time as a new bond for

   _____
   Legal entity name and DBA name

   is provided to the state of Washington with no lapse in coverage.

2. The bond shall become effective, _____, 20_____, and is intended to cover any subsequent periods for which the Department of Licensing may issue a license to the principal. This bond is to be accepted as a continuing obligation until cancelled by the surety with 30 days written notice of cancellation received by the state of Washington Department of Licensing, in accordance with the provisions of the Revised Code of Washington.

X Owner, each partner, corporate officer, member, manager of LLC signs and dates here.

Signature of owner/ each partner/ corporate officer/ member/ manager of LLC Date

Bonding company seal
(Required)

X Attorney in fact signs and dates here.

Signature of Attorney in Fact Date

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If you need accommodation, please call (360) 664-6455 or TTY (360) 664-0116.