Use this form to make payment on fingerprint submissions, only if you are approved for direct fingerprint submission.
Mail this completed form with a check or money order (payable to the Department of Licensing) to:

## Public Protection Services

Department of Licensing
PO Box 35001
Seattle, WA 98124-3401
For questions or language help call (360) 664-6611

## Fees

WSP only-\$58
WSP \& FBI-\$71.25

## Company information

| TYPE OR PRINT Company name | License number |
| :--- | :--- |
| Email | (Area code) Phone number |

## Fingerprints

| Applicant name (Last, First, Middle) | License number | Date submitted to WSP |
| :--- | :--- | :--- |
| Applicant name (Last, First, Middle) | License number | Date submitted to WSP |
| Applicant name (Last, First, Middle) | License number | Date submitted to WSP |
| Applicant name (Last, First, Middle) | License number number | Date submitted to WSP |
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