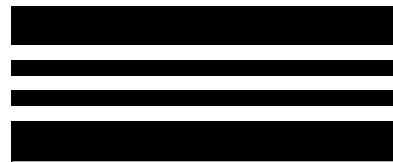




# Funeral Establishment Renewal Application



Renew your Funeral Establishment License.

Online: [professions.dol.wa.gov/](http://professions.dol.wa.gov/)

Or mail this completed form and the **\$325 renewal fee** in a check or money order (payable to the Department of Licensing) to:

**Funeral and Cemetery Licensing**  
**Department of Licensing**  
**PO Box 3777**  
**Seattle, WA 98124-3777**



For questions or language help call: (360) 664-1555

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 of establishment			
License number		UBI/UBI Business ID/UBI Location ID (16 digits)	
Mailing address			
City		State	ZIP code
Physical address			
City		State	ZIP code
(Area code) Phone number	Email		
Licensed designated funeral director name			Funeral director

## Legal background

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, has the business entity, any business owners, or any persons with controlling interest in this business had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit? .....  Yes  No
2. Within the last 5 years, in this state or any other jurisdiction, has the business entity, any business owners, or any persons with controlling interest in this business 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

*I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.*

_____	TYPE OR PRINT Name
_____	<b>X</b> Applicant signature
_____	Date and place

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