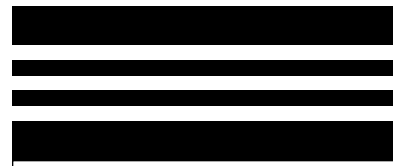




Change of Principal Application for Private Investigation Agency



Send this completed form with a check or money order, payable to the Department of Licensing, to:

Private Investigator Program
Department of Licensing
PO Box 35001
Seattle WA 98124-3401

Telephone: (360) 664-6611



This is an application for:

- Change of unarmed principal – \$150
- Change of armed principal – \$250

Agency information

TYPE OR PRINT UBI number		Agency name	
Type of business (check one) <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Foreign corporation			Number of partners (if partnership)
Agency address (street address in Washington state)			
City		State WA	ZIP code
(Area code) Agency telephone number	(Area code) Agency fax number	Agency email	
Agency mailing address (if different)			
City		State	ZIP code

Principal information

TYPE OR PRINT Name (Last, First, Middle initial)		
Social Security number required*	Date of birth (mm/dd/yyyy)	Citizenship <input type="checkbox"/> U.S. citizen <input type="checkbox"/> Resident alien
Home address		
City		State ZIP code
(Area code) Home telephone number	Email	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Requirement under which you will be qualifying for license: (check one) <input type="checkbox"/> Three years of experience in private investigation or a related field <input type="checkbox"/> Examination (see next page)		

*All applicants are required by federal and state law to provide their Social Security number (SSN) for use in child support enforcement programs (42 U.S.C. 666(a)(13) and RCW 74.20A.320). It may also be used for education loan repayment programs and identification of records with similar names. Submission of your SSN is mandatory; failure to submit it will result in denial of your application.

Criminal history

Answer the questions below. If you answer "Yes," attach a detailed explanation.

In this state or any other jurisdiction are you or have you:

- Within the last 10 years, had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you? Yes No
- Currently under indictment, or is there a criminal complaint, charge, or information pending against you? Yes No

Criminal history (continued)

3. Within the last 10 years, defaulted or been convicted of or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic offenses.) Yes No

What were you convicted of?	Date	Name of court	City and state	Misdemeanor, gross misdemeanor, or felony?
1.				
2.				

To show additional convictions, attach pages.

Fingerprinting

All private investigators must have fingerprint-based background checks. For information about the fingerprinting and background check process, go to www.dol.wa.gov/business/fingerprinting.html.

Experience (You must provide proof of your past employment)

Document your experience **beginning with your most recent or current position**. Acceptable forms of proof include: copies of payroll check stubs showing company name and pay period, copies of your federal tax return for the periods listed, certification from the employer verifying your status, duties, and time employed. Verification of license/registration from another state/jurisdiction is acceptable **only** if that state/jurisdiction has requirements that meet or exceed those of Washington State. Use the enclosed verification form for out-of-state work history.

Type of experience (<i>Manager, supervisor, administrator</i>)	From (<i>Month-day-year</i>)	To (<i>Month-day-year</i>)
Company name		
Company address (<i>Number and street, city, state, ZIP code</i>)		
Type of experience (<i>Manager, supervisor, administrator</i>)	From (<i>Month-day-year</i>)	To (<i>Month-day-year</i>)
Company name		
Company address (<i>Number and street, city, state, ZIP code</i>)		

Exam scheduling

Exams are given at driver licensing offices across the state. Select the location where you would like to take your exam, putting a "1" for your first choice and a "2" for your second choice. A licensing representative will contact you for scheduling.

Bellingham	Kent	Puyallup	Union Gap
Bel-Red	Lynnwood	Renton	Vancouver (136th Ave)
Bremerton	Olympia	Seattle (25th Ave)	Walla Walla
Clarkston	Omak	Smokey Point	Wenatchee
Everett	Parkland	Spokane (Sprague Ave)	
Federal Way	Port Angeles	Sunnyside	
Kennewick	Port Townsend	Tacoma (Yakima Ave)	

Applicant authorization and certification

Do you authorize all organizations and government agencies (local, state, federal, or foreign) to release any information, files, or records requested to this Department to process your application? Yes No

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

X

Date and place signed

Applicant signature

Providing false information in this application may be cause for the denial, suspension, or revocation of your private security guard license in the state of Washington.