WASHINGTON STATE DEPARTMENT OF LICENSING

Renew a Cosmetology or Tattoo/Body Art/Body Piercing License

This article explains how to renew a professional or business license for Cosmetology, Tattoo, Body Art, or Body Piercing.

Before You Start

- If you haven't already done so, you must create a SecureAccess Washington (SAW) account and link your existing professional or business license to your login before you can renew the license.
 - See the document <u>Create your user access to the Professional and</u> <u>Business Licensing System</u> for detailed instructions on these processes.
- To successfully use the system:
 - You must use **Google Chrome** as your browser.
 - If you are an Apple product user, you must also set Chrome as your default browser.
 - You must **turn the Chrome pop-up blocker OFF** (meaning Popups and redirects are Allowed).

Getting Started

- **1. Login** to the portal.
- 2. You may see a "License is ready for renewal" To-Do on your Home page.
 - If you see the To-Do, **click** the Renew button and go to:
 - <u>Renew a Professional License</u> OR
 - <u>Renew a Business License</u>
 - If you are a professional licensee and you don't see a Renewal To-Do, go to <u>Troubleshooting a Renewal</u>.
 - If you are a business licensee and don't see a Renewal To-Do, go to <u>Access a Business License</u>.

Manage Your Prof Your To-Do's	fessional and Business Li	censes Online	
License is ready for renewa	al		
License: 20110287 Renewal Reminder	License Type: Tattoo Artist	Expiration Date: September 10, 2021	Renew

Access a Business License

1. Click the Business Licenses link in the gray navigation bar at the top of the page.



2. Click the link in the tile for the business you want to renew.

	Ianage My Businesses		
	<u>Blueberry Ink</u>		
(dijohnson@dol.wa.gov		
I	UBI		
	125-987-369		

- **3.** You should see a Renew button in the list view for the business license.
 - If you see a Renew button, **click** the button and go to <u>Renew a Business</u> <u>License</u>.
 - If you don't see a Renew button, go to <u>Troubleshooting a Renewal</u>.

Business Licenses	5						
Blueberry Ink						Apply for Business	License
UBI: 125-987-369						Close Your Busines	is
Email: dijohnson@dol.wa.gov							
Business email: dijohnson@dol.wa	a.gov					Update Business N	ame
Business Phone: 555.555.5555						Make a Payment	
Primary Contact Name: Barry Blue	berry						
Primary Contact Phone: 555.555.5	555					More Actions	
Update business information							
Licenses	Account Rela	ationships	Unsubmitted Applications		Submitted Applicati	ions	More∽
License	License Type	Expiration Date	License Status	Sub-state	us Renew Status	al/Reinstatement	Action
21005713	Artist Shop	May 20, 2021	Active	None	None		Renew

Renew a Professional License

1. **Review** what you'll need for the renewal, answer any Eligibility Questions, and **click** Proceed.



2. On the Personal Information page, **review** the information and make any needed corrections to your name, personal identification information, and contact information.

Barry Niddle Name	
Middle Name	
Last Name	
Blueberry	
Suffix	
Your Personal Identification Information Birthdate Lap 1, 1986	
IIN An applicant is not required to have an SSN or ITIN. If you provide a SSN or ITIN it will be used in accordance with 42. U.S.C. 6 14.20A.320. If you do not have an SSN or ITIN, please leave that section blank.	66(a)(13) and R
IIN • An applicant is not required to have an SSN or ITIN. If you provide a SSN or ITIN it will be used in accordance with 42. U.S.C. 6 14.20A.320. If you do not have an SSN or ITIN, please leave that section blank. SSN •	566(a)(13) and R
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IIN An applicant is not required to have an SSN or ITIN. If you provide a SSN or ITIN it will be used in accordance with 42. U.S.C. (44.20A.320. If you do not have an SSN or ITIN, please leave that section blank. SSN	566(a)(13) and R
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IIN An applicant is not required to have an SSN or ITIN. If you provide a SSN or ITIN it will be used in accordance with 42. U.S.C. (4.20A.320. If you do not have an SSN or ITIN, please leave that section blank. SSN Vour Contact Information 'Phone S55.555.5555 Check if you have a foreign phone number Dther Phone	566(a)(13) and R
IIN An applicant is not required to have an SSN or ITIN. If you provide a SSN or ITIN it will be used in accordance with 42. U.S.C. (4.20A.320. If you do not have an SSN or ITIN, please leave that section blank. SSN Your Contact Information Phone 555.555.5555 Check if you have a foreign phone number Dther Phone Email	566(a)(13) and R

- 3. **Review** your mailing address, and make any needed corrections.
 - If you update your mailing address, **click** the Validate Address button. You only need to validate the address if you made a change to it.

Your Mailing Address
* Country
United States
* Address Line 1
722 Buckle Ln SE
Address Line 2
*City
Olympia
* State
WA *
* ZIP
98501
* County
Thurston Validate your address
Validate Address

3. Click Continue.

- **4. Answer** all the questions on the License Information page.
 - Tattoo, Body Art, and Body Piercing renewals have a question regarding the Bloodborne Pathogen certificate. This information isn't required for the renewal, but please provide it if you have it.

	0	
Personal Information	License Information	Attachments
General Questions		
How do you want your name displayed on you	r license?	
Select	۵. ۲	
Military Questions		
I am a current or former member of the armed	forces, the United States Public Health Service Commissioned Corps, or the Mercha	ant Marines of the United States.
🔿 Yes 🔵 No		
Yes No I am a current or former spouse or registered d Yes No	omestic partner of a military member, and I have an existing license in this professi	ion from another state. My spouse/partner is being transferred and I am moving to Washing
yes No 'I am a current or former spouse or registered d Yes No Legal Background Questions	omestic partner of a military member, and I have an existing license in this professi	ion from another state. My spouse/partner is being transferred and I am moving to Washing
Yes No 'I am a current or former spouse or registered d Yes No Legal Background Questions Within the last 5 years, in this state or any othe Had any action (fine, suspension, revocation, c Yes No	omestic partner of a military member, and I have an existing license in this professi rjurisdiction, have you: ensure, surrender, etc.) taken against any professional or occupational license, cert	ion from another state. My spouse/partner is being transferred and I am moving to Washing tiffcation, or permit held by you?
Yes No 1 am a current or former spouse or registered d Yes No Legal Background Questions Within the last 5 years, in this state or any other Had any action (fine, suspension, revocation, c Yes No Defaulted, been convicted of, or entered a plea Yes No	omestic partner of a military member, and I have an existing license in this professi r jurisdiction, have you: ensure, surrender, etc.) taken against any professional or occupational license, cert of no contest to a gross misdemeanor or felony crime? (don't include traffic offens	ion from another state. My spouse/partner is being transferred and I am moving to Washing tification, or permit held by you? es.)
Yes No 'I am a current or former spouse or registered d Yes No Legal Background Questions Within the last 5 years, in this state or any other Had any action (fine, suspension, revocation, c Yes No Defaulted, been convicted of, or entered a plea Yes No Profession Specific Questions	omestic partner of a military member, and I have an existing license in this professi r jurisdiction, have you: ensure, surrender, etc.) taken against any professional or occupational license, cert of no contest to a gross misdemeanor or felony crime? (don't include traffic offens Profession Specific Questions will vary by license type	ion from another state. My spouse/partner is being transferred and I am moving to Washing tification, or permit held by you? es.)

5. Click Continue.

- If you are a Cosmetology or related licensee, go to step 6.
- If you are a Tattoo, Body Art, or Body Piercing Artist, you'll see the Attachments page. If you have your Bloodborne Pathogens Certificate, **upload** it here, and click Continue.

License Renewal: Tatto	o Artist		
Personal Information	License Information	Attachments	Review and Submit
Attachments You can upload these file formats: .pdf, .jpg, .jpeg, .j	ong, tiff, .bmp, or .gif.		
Bloodborne Pathogens Certificate			
▲ Upload Files Or drop files			
Back			Save And Submit Later Continue

6. On the Review and Submit page, **read** and check the certifications (these will vary by license type), **enter** your name exactly as it appears below the Signature box and **click** Continue.

I certify that	
Declaration	
I declare, under penalty of perjury under the law of Washington, that all of the information I've provided in this application and any associated documents is true, complete, and correct.	
Signature	
Please type your legal name as shown below. Barry Blueberry	
Barry Blueberry	
Back	Save And Submit Later Continu

7. Go to Pay for your Renewal.

Renew a Business License

1. **Review** what you'll need for the renewal, answer any Eligibility Questions, and **click** Proceed.

What you'll need			
Make sure you meet all the requirements listed on our Artist Shop Web UBI number from Business Licensing Services Insurance policy form	site.		
If payment required, these are the options available:			
Credit or debit card Bank account Billing code I ha business or someone else is paying for you, they'll give you a t	illing code to use as payment.		
Eligibility			
By answering the following questions, eligibility for the license applica	tion will be determined.		
Do you currently hold Public Liability Insurance in an amount not less	han \$100,000?		
• Yes 🔿 No			

- 2. Click the Validate UBI button, and then click OK at the pop-up.
- **3. Review** the rest of the information on the Business Information page and make any needed additions or corrections.
 - If you update either of your addresses, **click** the Validate Address button for that address. You only need to validate an address if you made a change to it.

0	0	
Business		
Information	Information	
Business Structure		
Partnership		
UBI 🚯		
125-987-369		
Validate UBI		
UBI Business ID 👔		
001		
UBI Location ID 🚯		
0001		

- 4. Click Continue.
- 5. Answer all the questions on the License Information page and click Continue.

Business Information	License Information	Financial Guarantee	Review and Submit
General Questions			
Under what name will you be doing busines:	s at this location for this profession?		
Use business entity name only		A V	
Military Questions		_	
l am a current or former member of the arm	ed forces, the United States Public Health Service Commissioned Corps, or the N	Merchant Marines of the United States.	
I am a current or former member of the arm Yes No I am a current or former spouse or registered Yes No Legal Background Questions	ed forces, the United States Public Health Service Commissioned Corps, or the k d domestic partner of a military member, and I have an existing license in this pr	terchant Marines of the United States. ofession from another state. My spouse/partner is being transferred and I am moving to Washin	igton.
I am a current or former member of the arm Yes No I am a current or former spouse or registered Yes No Legal Background Questions Within the last 5 years, in this state or any ot	ed forces, the United States Public Health Service Commissioned Corps, or the k d domestic partner of a military member, and I have an existing license in this pr her jurisdiction, has the business entity, any business owners, or any persons w	terchant Marines of the United States. ofession from another state. My spouse/partner is being transferred and I am moving to Washin th controlling interest in this business:	ngton.
I am a current or former member of the arm. Yes No I am a current or former spouse or registered. Yes No Legal Background Questions Within the last 5 years, in this state or any of Had any action (File, supersion, revocation Yes Yes No	ed forces, the United States Public Health Service Commissioned Corps, or the A domestic partner of a military member, and I have an existing license in this pr her jurisdiction, has the business entity, any business owners, or any persons w i, censure, surrender, etc.) taken against any professional or occupational licens	terchant Marines of the United States. ofession from another state. My spouse/partner is being transferred and I am moving to Washin th controlling interest in this business: e, certification, or permit held by them?	ngton.

6. Enter the information for your financial guarantee.

•	• • •		O	
Business Information	License		Financial Guarantee	Review an Submit
Financial Guarantee				
nsurance Company Name				
Insurance R Us				
olicy Number				
123992				
Effective Date of Policy				
May 1, 2021				
Expiration Date				
May 1, 2022		#		
Amount of Policy				
100000				

7. On the Review and Submit page, **read and check** the certifications, **enter** your name exactly as it appears below the Signature box, and **click** Continue.

-
nue

8. Go to Pay for your Renewal.

Pay for Your Renewal

You must **follow ALL steps below** for the payment to process correctly. Stopping or backing out of the process at any point will prevent the payment from processing and cause a delay in paying for and processing the renewal.

The payment example below is for a Real Estate Branch, but the payment process is the same regardless of license type.

Make Payment page, Fees tab

The fee description and amount to be charged are displayed. **Click** Continue.

Make	e Payment						
LEASE DO N you want to LL PAYMEN	NOT USE THE BROWSER'S B. to return to your application ITS ARE NON-REFUNDABLE.	ICK BUTTON AS THAT MAY OV simply log out and log back i	ERWRITE YOUR DATA.				
	Fees	Checkout	Confirmation				
Note that ;	you must use a valid VISA, M	asterCard, AmEx or Discover of	redit card to pay online.				
Your selec	ted fees will be hidden from	the cart after you press the Pr	rocess ePayment button on the Che	ckout tab. Please give up to 2 hou	irs for the payment process to complet	te.	
Your selec	ted fees will be hidden from	the cart after you press the Pr	rocess ePayment button on the Che	ckout tab. Please give up to 2 hou Fees	urs for the payment process to complet	te.	
Your selec	tted fees will be hidden from Transaction Number	the cart after you press the Pr	rocess ePayment button on the Che License Type	ckout tab. Please give up to 2 hou Fees Application Method	rs for the payment process to complet Reference Information	te. Amount	Amount Outstanding
Your select	ted fees will be hidden from Transaction Number REA2001808	the cart after you press the Pr Fee Description License Fee	rocess ePayment button on the Cho License Type Real Estate Branch	Construction Please give up to 2 hour Fees Application Method General Application	urs for the payment process to complet	Amount \$189.50	Amount Outstanding \$189.50
Your select	ted fees will be hidden from Transaction Number REA2001808 Total Select	the cart after you press the Provide the Cart after you press the Providence of the	License Type Real Estate Branch	cckout tab. Please give up to 2 hou Fees Application Method General Application	rs for the payment process to complet	Amount \$189.50	Amount Outstanding \$189.50
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Your select	tted fees will be hidden from Transaction Number REA2001808 Total Select Email Receipt	the cart after you press the Provide the Cart after you press the Provide the Cartest and the	License Type Real Estate Branch	ckout tab. Please give up to 2 hou Fees Application Method General Application	rs for the payment process to complete	Amount \$189.50	Amount Outstanding \$189.50
Your select	tted fees will be hidden from Transaction Number REA2001808 Total Select Email Receipt	the cart after you press the Pr Fee Description License Fee \$189.50 o strawberry@mailinato	cocess ePayment button on the Che License Type Real Estate Branch	ckout tab. Please give up to 2 hou Fees Application Method General Application	rs for the payment process to complete	Amount \$189.50	Amount Outstanding \$189.50

Make Payment page, Checkout tab

- **1. Select** the payment method you prefer from the dropdown.
 - Credit Card is the default.
 - Pay by Employer is a special process that requires a Billing PIN from your employer so your fees can be transferred to their account for payment.

PAYMENTS ARE NON-REFUNDABL	ion, simply log out and log back in. .E.			
Fees	Checkout	Confirmation		
	onoonout			
	and the cost offer your proce the Dros	enter a Deventer butter and the Char	went to be Disease alive up to 2 hours for the normant or	error to complete
our selected fees will be hidden fr	om the cart after you press the Proc	cess erayment button on the Cheo	Rout tab. Please give up to 2 hours for the payment pro	cess to complete.
our selected fees will be hidden fr Total Outstanding Ba	lance \$189.50	cess enayment button on the Chee	Total Payment Amount	\$189.50
our selected fees will be hidden fr	lance \$189.50	cess enayment outton on the chee	Xout tao. Prease give up to 2 nours for the payment pre-	\$189.50
our selected fees will be hidden fn Total Outstanding Ba	the carcatter you press the Proc	ess erayment outton on the cher	Kout tad. Prease give up to 2 mours for the payment pri Total Payment Amount	\$189.50
our selected fees will be hidden fn Total Outstanding Ba Payment Mi Payment Mi	ance \$189.50 ethod Credit Card	ess erayment button on the chee	Kout uid. Heade give up to z nourin for the payment pr Total Payment Amount	\$189.50
Total Outstanding Ba Total Outstanding Ba Payment Ma Payment An	ance \$189.50 ethod Credit Card •		Kout uid. Heade give up to z nourin for the payment pri Total Payment Amount	\$189.50

- 2. **Continue** based on your payment method.
 - Credit Card or ACH (electronic check): Click the Process ePayment button and go to <u>Third Party Payment Details page</u>.

Make Paymen	ıt	
EASE DO NOT USE THE BROWSER	R'S BACK BUTTON AS THAT MAY OVERWRITE YOUR DATA. ation, simply log out and log back in.	
L PATMEN IS ARE NON-REFONDA	SLE.	
Fees	Checkout Confirmation	
Total Outstanding	Balance \$189.50	Total Psyment Amount \$189.50
Payment	Method Credit Card T	
Payment Payment J	Method Credit Card	
Payment J Payment J Previous	Method Credit Card mount 189 50	Process ePayment

- **Pay by Employer: Enter** the Billing PIN you received from your employer and **click** the Transfer Payment button.
 - Your part of the payment process is complete and you'll be returned to the Professional Licenses page. You'll see your application in Pending Payment status under the Submitted Applications tab.
 - Your employer must pay the transferred fees before we can continue to process your application.

Make Payment		
PLEASE DO NOT USE THE BROWSER'S BACK BU If you want to return to your application, simply ALL PAYMENTS ARE NON-REFUNDABLE.	JTTON AS THAT MAY OVERWRITE YOUR DATA. y log out and log back in.	
Fees	Checkout Confirmation	
Your selected fees will be hidden from the ca Total Outstanding Balanc	rt after you press the Process ePayment button on the Checkou	: tab. Please give up to 2 hours for the payment process to complete. Total Payment Amount \$91.00
Payment Metho	Pay by Employer 🗸	
Payment Amou	nt 91.00 [425690]	
Previous		Transfer Fee
To complete the payment process successf	ully, please do not click your browser back button.	

Third Party Payment Details page

Enter the required information for your payment method and click Continue.

• The Phone Number must be entered as digits only, no spaces or punctuation.

Credit Card Payment Details page

Contact Information	
First Name	Suzie
Last Name	Strawberry
Company	(Optional)
Address 1	1215 Cheesecake Ct
Address 2	(Optional)
City/Town	Olympia
State/Province/Region	WA
Zip/Postal Code	98501
Country	United States
Phone Number	
Email Address	strawberry@mailinator.com
Payment Method	
Card Number	
Expiration Date	Month Vear V
Card Security Code	(a)
Card Billing Address	Use my contact information address
	○ Use a different address
Continue Cancel	

Contact Information	
First Name	Suzie
Last Name	Strawberry
Company	(Optional)
Address 1	1215 Cheesecake Ct
Address 2	(Optional)
City/Town	Olympia
State/Province/Region	WA
Zip/Postal Code	98501
Country	/ United States
Phone Number	r
Email Address	strawberry@mailinator.com
Bank Routing Number Bank Account Number Bank Account Type	Sample Check 1215 123 Main St. Anytown, MO 12345 WY TO THE S
Continue	

ACH (Electronic Check) Payment Details page

Third Party Review Payment page

Review your payment details, then **click** Confirm.

Please review the information below and select Confirm to process your payment. Select Back to return to the previous page to make changes to your payment.					
Payment Details					
Description	WA State Department of License TEST Professional or Business License dolwa.gov				
Payment Amount	\$189.50				
Payment Date	11/03/2020				
Payment Method					
Payer Name	Suzie Strawberry				
Card Number	*1111				
Expiration Date	Feb-2022				
Card Type	Visa				
Confirmation Email	strawberry@mailinator.com				
Billing Address					
Address 1	715 Shortcake Ct				
City/Town	Olympia				
State/Province/Region	WA				
Zip/Postal Code	98502				
Country	United States				
Contact Information					
First Name	Suzie				
Last Name	Strawberry				
Address 1	715 Shortcake Ct				
City/Town	Olympia				
State/Province/Region	WA				
Zip/Postal Code	98502				
Country	United States				
Phone Number	555555555				
Encold addresses	strawberry@mailinator.com				

Third Party Confirmation page

The confirmation page includes a Confirmation Number that can be used to trace your payment if there is a problem. This number will be included on your receipt.

Important! Click Continue. If you don't, the payment process is not complete.

- There will be **delay** as you are transferred back to the Professional and Business Licensing system.
- **Don't** click Continue again or your receipt won't show the correct information.

Confirmation	
Please keep a record of your Confirmation Number, or	print this page for your records.
Confirmation Number WA3TST000083409	
Payment Details	-
Description	WA State Department of License TEST Professional or Business License dol.wa.gov
Payment Amount	\$189.50
Payment Date	11/03/2020
Status	PROCESSED
Card Number Card Type Confirmation Email	*1111 Visa strawberry@mailinator.com
Billing Address	
Address 1	715 Shortcake Ct
City/Town	Olympia
State/Province/Region	WA
Zip/Postal Code	98502
Continue Continue Continue	turbed States

Make Payment page, Confirmation tab

This page is your receipt. We'll email a copy of this receipt to you. **Click** Continue.

• The Confirmation Number from the previous page is called Reference Number on this page.

Fees	Checkout	Confirmation
Thank you for sub	mission of your application.	
Your payment was success	ul.	
Order Status	Successful	
Applied Payment	\$189.50	
Contact	Suzie Strawberry	
Process Date	502/e 50/awderry 11/2/2020 3:59 PM	
Dessist Number	B 0050402	number from
Payment	Credit Card	
Reference Number	WA3TST000083409	previous page
Amount	\$189.50	
		Fee Payments
		r cor aymonto
Transaction Number	Fee Description Program Type Lice	rense Tune Application Method Amount Payment Amount Autorianding
Transaction Number	Fee Description Program Type Lice	corese Type Application Method Amount Payment Amount Amount Outstanding

Submit Your Feedback page

Provide user feedback with comments and/or a star rating and **click** Continue OR **click** Skip.

ubmit your Feedback	
ur feedback is important to us and will help us improve our application. Comments are reviewed weekly. If you have questions, please go to the following URL to find contact information :	
tp://www.dol.wa.gov/contact/professions.html	
vnments	
Worked great! Thank you!	
Worked great! Thank you!	
Sidoni Skin	
Submit Skip	

Next Steps

- **Auto-renewal** (license renewed without further review by Department of Licensing): You'll be returned to the Licenses tab of the Business Licenses page.
 - The Expiration Date should be updated, the License Status should be Active, and your Renewal/Reinstatement Status should show Complete.
- **Renewal requiring review:** You'll be returned to the Submitted Applications tab of the Business Licenses page.
 - **Click** the Download Application button to get a copy of the application you submitted.

Troubleshooting a Renewal

I don't have a Renewal To-Do, nor do I see a Renew button for my license. What do I do?

First, check to make sure the license is eligible for renewal. You can renew up to 120 days before your expiration date.

If you are eligible for renewal:

- Check under the Submitted Applications tab and look for a Submitted Renewal Application.
 - If the application is in In-Review status, it means that Department of Licensing staff must review your application before the renewal can be completed.
 - If the application is in Payment Pending status, you must pay the renewal fee to complete the renewal process.
 - If you already paid for the renewal but it is still showing in Pending Payment status, contact the program so we can determine what happened.
 - If you received a payment receipt, the Reference Number from your payment receipt will help us track what happened to the payment.

Blueberry Ink					Apply for Business	is License
UBI: 125-987-369					Close Your Busine	
E mail: dijohnson@dol.wa.gov					Undete Duckersen	News
Business email: dijohnson@dol.wa.	gov				opdate business r	Name
Jusiness Phone: 555.555.5555					Make a Payment	
Primary Contact Phone: 555.555.55	55				More Actions	
Licenses	Account Relationships		Unsubmitted Applications	Submitted Applica	tions	More∽
ewal Applications						
license	Profession	License Type	Expiration Date	Status		Actions

- If there is no application under Submitted Applications, look under Unsubmitted Applications to see if there is a Draft Renewal Application.
 - If there is a Draft application, click the Edit button to continue the Renewal Application.
 - If there is no Renewal Application under Unsubmitted Applications, contact the program so we can restore the Renew button for you.

Business Draft Applications						
Blueberry Ink					ply for Business License	
UB: 125-987-369					ose Your Business	
Email: dijohnson@dol.wa.gov Business email: dijohnson@dol.wa.gov					Update Business Name	
Business Phone: 55.555.5555 Primary Contact Name: Barry Blueberry					Make a Payment	
Primary Contact Phone: 555.555.5555 Update business information					ve Actions	
Licenses	Account Relationships		Unsubmitted Applications	Submitted Applications	More✓	
Renewal/Reinstatement Applications						
License	Profession	License Type	Last Updated	Actions		
21005713	Body Art and Body Piercing	Artist Shop	May 20, 2021 08:47 AM	Edit	Delete	