

# **Private Investigator** Association Request

Add a private investigator with an active license to your agency. You can also request their license renewal at the same time.

# Online: https://professions.dol.wa.gov

Or mail this form, any requirred attachments, and a check or money order for the fees (payable to the Department of Licensing) to:

Public Protection Services Department of Licensing PO Box 35001 Olympia, WA 98124-3401 For questions or language help: call (360) 664-6611 or email security@dol.wa.gov

## Important:

- This form must be signed by the employee and the agency representative.
- The private investigator agency must provide the agency license number.

#### Fees

Add a private investigator–**\$25** 

- Armed endorsement-additional \$110
- □ Renew my employee's license–**\$193**

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.
- $\square$  \$0 self-print license online.
- □ \$5 each. DOL print and mail license. Quantity\_\_\_\_\_ Total \$\_\_\_\_\_

# **Agency information**

TYPE OR PRINT Agency name			Private investigator agency license number
Street address as it appears on your license		· ·	
City		State	ZIP code
(Area code) Phone number	Email		
UBI/UBI Business ID/UBI Location ID (16 digits)			
Mailing address (if different than above)			
City		State	ZIP code

Date

Title of signee

Company representative signature

## **Employee information**

TYPE OR PRINT Name as you would liike it to appear on your license			Private investigator license number	
Full legal name (Frst, Middle, Last)				
Social Security number		Date of birth (mm/dd/yyyy)		
Residence address				
City			State	ZIP code
(Area code) Phone number	Email			-
Military? (check if applicable) Current or former:  Military mem  *You are not required to have a Social Security Nu	<b>7</b> 1		•	

"You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

# Legal background

Answer the following Answer the questions below. If you answer "Yes," attach a detailed explanation.	
<ol> <li>Within the last 5 years, in this state or any other jurisdiction, have you had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you?</li></ol>	🗆 No
2. Within the last 5 years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic convictions.).	□ No

By completing this application, you authorize any business associates (past and present) and an government agencies (local, state, or federal) to release any information files, or records which may be required for a background investigation to the Department of Licensing.

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

TYPE or PRINT Name X
Employee signature

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

Date and place