



**DUPLICATE ESCROW LICENSE APPLICATION**

Escrow Agent Name: _____ Escrow Agent License Number: 540-EA- _____ Number of duplicate licenses requested: _____	<b>\$28.01 FEE PER DUPLICATE LICENSE</b>  Make check Payable To: "WASHINGTON STATE TREASURER"
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Use this form to apply for a duplicate escrow agent or escrow officer license. Check all boxes that apply.

<input type="checkbox"/> <b>MAIN OFFICE ESCROW AGENT</b> DFI License Number(s): _____	<input type="checkbox"/> <b>DESIGNATED ESCROW OFFICER</b> DFI License Number(s): _____	<b>Reason for Duplicate:</b> <input type="checkbox"/> Loss  <input type="checkbox"/> Damage
<input type="checkbox"/> <b>BRANCH OFFICE ESCROW AGENT</b> DFI License Number(s): _____	<input type="checkbox"/> <b>ESCROW OFFICER</b> DFI License Number(s): _____	

<b>1. EXACT PRINCIPAL BUSINESS ADDRESS OF ESCROW AGENT:</b>
(A) Main address: (Do not use a P.O. Box) _____ Number and Street                      City                      State                      Zip Code/ Postal Code
<b>2. ESCROW OFFICER IDENTIFYING INFORMATION:</b>
(A) Full last, first and middle names: _____ First Name                      Middle Name                      Last Name                      Suffix (if any)
(B) Social Security Number: _____      (C) Date of Birth: _____      (D) License Number: _____

<b>REQUESTED BY:</b>
_____ Signature of Authorized Official                      Date
_____ Printed Name of Authorized Official                      Title

Mail this completed form and fee to:

**Via US Postal Service**  
 Dept. of Financial Institutions  
 Division of Consumer Services  
 P.O. Box 41200  
 Olympia, WA 98504-1200

**Via other couriers (eg: FedEx, UPS, etc)**  
 Dept. of Financial Institutions  
 Division of Consumer Services  
 150 Israel Rd. S.W.  
 Tumwater, WA 98501

STILL NEED HELP? Contact DFI's Division of Consumer Services licensing staff by phone at 360-902-8703 or send your questions via e-mail to [CSLicensing@dfi.wa.gov](mailto:CSLicensing@dfi.wa.gov) for additional assistance.