



Contractor Registration Request for Duplicate License or Address Change

Contractor Registration
PO Box 44450
Olympia WA 98504-4450

Contractor Registration	UBI Number
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Request for Duplicate License \$ _____

Address Change

Check if you want this address change to update your workers' compensation account.

Company Name		
New Address		
City	State	Zip Code
Phone Number	Email Address	

Print Name

Signature

Date