



State of Washington  
Business Licensing Service  
PO Box 9034  
Olympia, WA 98507-9034  
1-800-471-7985

UBI
Owner name

## Application for Approval of Limousine Chauffeur Training Course

Please type or print clearly in dark ink.

For Validation—Office Use Only

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03N-400-925-0003

### Fee due: \$25 (non-refundable)

*Make check payable to Department of Revenue*

Use this form to notify the Department of Revenue of your intent to offer a limousine chauffeur training course. If the course will last more than three calendar days, and you are offering it to people outside of your business or organization, you must also be licensed by the State of Washington Workforce Training and Education Coordinating Board.

<b>A Applicant information</b>		
Name of school	Telephone	
Street address		
City	State	Zip code
Mailing address (if different)		
City	State	Zip code
<b>B Signature of business owner</b>		
By signing below, the business owner certifies that the instructor(s) will strictly adhere to the chauffeur training guidelines and rules established by the State of Washington.		
Owner's signature <b>X</b>	Date	