

APPLICATION TO ESTABLISH AN FAS DEPOSIT ACCOUNT WITH THE DEPARTMENT OF LABOR AND INDUSTRIES

FAS (Factory Assembled Structures) Deposit accounts are established primarily for businesses or other entities that are not currently licensed or registered with the department as electrical or construction contractors but are legally required to purchase work permits from the Department.

The deposit account allows the business or entity to deposit money with the Department and request transfers from this account for the purchase of permits and other Departmental business.

<u>This account is subject to all legal attachments.</u> To request the establishment of this account, please provide the following information and submit to:

Dept. of Labor and Industries PO Box 44430 Olympia, Washington 98504-4430:

Please allow seven to ten days for processing to establish your account.

APPLICATION TO ESTABLISH FAS DEPOSIT ACCOUNT

COMPANY/BUSINESS NAME: (limited to 30 characters)					
COMPLETE ADDRESS:					
Physical Address					
City		State	Zip		
			1		
Mailing Address					
		T			
City		State	Zip		
Daytime Phone number		I			
UBI Number	Fax number				

	☐ PLAN REVIEW ☐ INSIGNIA ☐ NLEA ☐ INSPECTIONS ☐ OTHER			
DEDUCT FEES ACCORDING (Please mark an X on the appro				
WAC 296-150C-3000	Commercial Coache	es		
WAC 296-150F-3000	Factory Built Housing & Commercial Structures			
WAC 296-150M-300	0 Manufactured Homes			
WAC 296-150P-3000	00 Recreational Park Trailers			
WAC 296-150R-3000	Recreational Vehicle	es		
WAC 296-150T-3000	AC 296-150T-3000 Factory Built Temporary Worker Housing Structures			
WAC 296-150V-3000	Conversion Vendor	Units & Medical Units		
the account, in payment for the	be listed below. These he services noted above			
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the account, in payment for the	be listed below. These he services noted above	e individuals will be authorized to disperse funds from e.		
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The owner/ member of the business requesting the account must sign this form and have his/her signature notarized.				
Print Name				
Signature (signature must be owner/member of business requesting account)		Date		
Notary Seal Here				
Subscribed and sworn to before me on this the day of,				
Notary Signature:				
Notary Public in and for the State of				
Residing in				
My commission expires				
For Depa	artmental use only:			
MA ACCT number assigned:				
Assigned by:	Date of completion			

CUSTOMER'S CERTIFICATIONS AND ASSURANCES

By submitting this application, the Customer identified above understands that establishment of the FAS deposit account is intended for direct deposit and transfer of funds between the Customer and L&I for the purchase of FAS related permits and other official Department business transactions. L&I will forward a statement of account to the Customer each month.