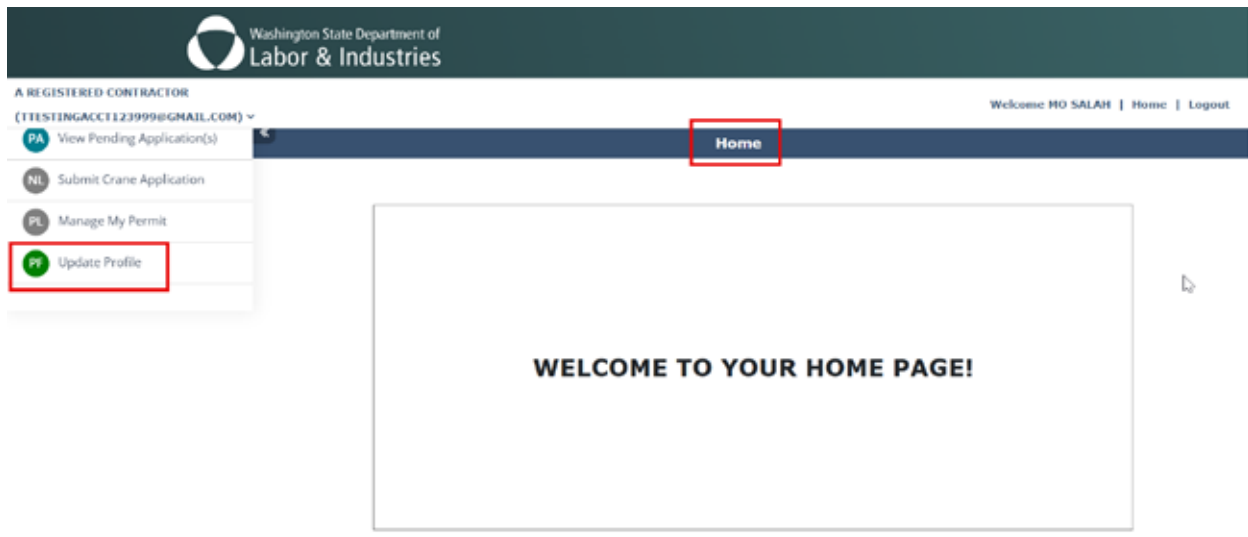


Crane Certification and Permit Management System

Update Profile

These steps explain the “Update Profile” screen. This screen allows you to see details of business entity. You can view details like Entity Information, License Information, Mailing Address.

From your Home screen, click on Update Profile:



The **Update Profile** screen is displayed with Entity Information, License Information, Mailing Address sections.

Washington State Department of Labor & Industries

A REGISTERED CONTRACTOR (TTESTINGACT123999@GMAIL.COM) - Welcome MO SALAH | Home | Logout

[Update Profile](#)

Fields marked with asterisk (*) are required. [Return to Home](#)

Entity Information

Entity Number: 140003
 Entity Name*: A REGISTERED CONTRACTOR
 IBI #: 660-555-999

Primary Contact

First Name*: MO Middle Name:
 Last Name*: SALAH
 Email*: MoSalah242025@outlook.com Phone*: 202-111-0322

License Information

General Contractor License#: REC5RC/55DL

Mailing Address

Country*: United States
 Address*: 123 MAIN ST State/Prov/Int:
 City*: OLYMPIA State/Province*: WASHINGTON ZIP*: 98504
 County*: Thurston Primary Phone # - Ext*: 202-555-5555 Alternate Phone # - Ext:
 Fax: Primary E-mail*: TTESTINGACT123999@GMAIL.COM Alternate E-mail:

In the Entity Information section, Primary Contact subsection can be updated. And, Mailing Address section is editable and can be updated.

Washington State Department of Labor & Industries

A REGISTERED CONTRACTOR (TTESTINGACT123999@GMAIL.COM) - Welcome MO SALAH | Home | Logout

[Update Profile](#)

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 City*: OLYMPIA State/Province*: WASHINGTON ZIP*: 98504
 County*: Thurston Primary Phone # - Ext*: 202-555-5555 Alternate Phone # - Ext:
 Fax: Primary E-mail*: TTESTINGACT123999@GMAIL.COM Alternate E-mail:

In the Mailing Address section, please verify the “Primary E-mail” field. Make sure the email listed is the testing email for your account. If it is anything other than that, please update with your “testing email address”.

Update Profile

Fields marked with asterisk (*) are required. [Return to home](#)

Entity Information

Entity Number	140003		
Entity Name*	A REGISTERED CONTRACTOR		
IBI #	660-555-999		
Primary Contact			
First Name*	MO	Middle Name	
Last Name*	SAJAH	Phone*	202-111-0322
Email*	MoSajah242025@outlook.com		

Licenses Information

General Contractor License#*	REG5RC/59DL
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Mailing Address

Country*	United States	State/Province*	WASHINGTON	Zip*	98504			
Address*	123 MAIN ST		City*	OCYBOLA	Primary Phone # - Ext*	260-555-5555	Alternate Phone # - Ext	
County*	Thurston	Primary E-mail*	TTESTINGACT123999@GMAIL.COM	Alternate E-mail	E-mail			
Fax								

Reset

Save