



**WASHINGTON STATE GAMBLING COMMISSION**

LOCATION: 4565 7th Avenue SE, Lacey WA 98503  
MAILING ADDRESS: P.O. Box 42400, Olympia WA 98504-2400  
TELEPHONE: 360-486-3440 / FAX NUMBER: 360-486-3631  
TOLL-FREE: 1-800-345-2529 / TDD: 360-486-3637  
WEB SITE: [www.wsgc.wa.gov](http://www.wsgc.wa.gov)

**CARD ROOM EMPLOYEE  
TRANSFER / ADD EMPLOYER APPLICATION FEE: \$ \_\_\_\_\_ .00**

[See Section 4 of the attached fee schedule.](#)

**NOTE:** All refunds of application / license fees will be issued to the applicant.

**IF YOU ARE COMING TO OUR LACEY OFFICE AND PAYING FOR YOUR TRANSFER / ADD FEES WITH CASH, YOU MUST HAVE THE EXACT AMOUNT. PLEASE DO NOT SEND CASH IN THE MAIL.**

\_\_\_\_\_

New Employer

0 0 - \_\_\_\_\_

Organization #

\_\_\_\_ / \_\_\_\_ / 2 0

First Day of Work

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

\_\_\_\_ / \_\_\_\_ / 2 0

Expiration Date

6 8 - \_\_\_\_\_

Employee's License Number

\_\_\_\_\_

Last 4 digits  
Employee's SSN

Employer's Signature (required):

\_\_\_\_\_

Employee's Signature (required):

\_\_\_\_\_

Please note that we are required by [WAC 230-05-001](#) to retain a portion of the fee submitted for processing costs. Unfortunately, our costs for this transaction exceed the fee amount received; therefore no refund will be issued. This includes licensees that submit fees for a transfer and never worked at the new location.

**Mailing address has changed since last renewal – please complete the form on the reverse side.**

**YOUR APPLICATION AND THE PUBLIC RECORDS ACT**

From the moment we receive your application, it becomes a public document subject to the Public Records Act ([RCW 42.56](#)) and other Washington laws. The Commission may disclose to the public, other state or federal agencies, or discuss at a public meeting all information set forth in this application and all supplemental information submitted. The Commission responds to public document requests through a Public Disclosure Request process. In the event that the Commission receives a public disclosure request regarding this application or the license file established, you may request in writing, that the Commission notify you of such request as provided in [RCW 42.56.540](#).

**SPECIAL INFORMATION**

Card game licensees must report changes in licensed employees (See [WAC 230-06-083](#)).

**Business Office Use Only:**

Code: 211-|\_|\_|\_| Date: |\_|\_|/|\_|\_|/|\_|\_|\_|\_| Amt: \$|\_|\_|\_|\_|.00 Val #: \_\_\_\_\_

