

CPA-Inactive
Certificate Conversion
To Licensure Application

Board of Accountancy
Washington State



APPLYING FOR (check one):

Certificateholder License Application – **FEE \$0**
(This application is for individuals holding a valid certificate but has never been licensed.)

Return to Previously Held Status as Licensee Application – **FEE \$0**
(This application is for individuals holding a valid certificate and has been licensed before.)

CONTACT INFORMATION

Full Name: _____

CPA-Inactive Certificate #: _____

Mailing Address (including city, state, zip code, country):

Daytime Phone: (_____) _____

Email Address: _____

Date of Birth: _____

GOOD CHARACTER – Please check the appropriate answer for the following questions.

Attach separate page(s) explaining any “yes” answers:

YES or NO

- Have you been convicted of a felony?..... YES NO
- Have you been convicted of a crime involving dishonesty? YES NO
- Have you been issued an order, sanction, or modification of a license, certificate, permit or practice rights by the SEC, PCAOB, IRS, AICPA, GAO, OIG, or any other federal regulatory or oversight agency or federal standards setting body, or another state board of accountancy for any cause other than failure to pay a professional license fee by the due date or failure to meet the CPE requirements of another state board of accountancy? YES NO
- Have charges been filed by or have you been notified of an investigation undertaken by the SEC, PCAOB, IRS, AICPA, GAO, OIG, or any other federal regulatory or oversight agency or federal standards setting body, another state board of accountancy, or state taxing, insurance or securities regulatory body regarding a prohibited act that would be a violation of board ethical or technical standards? YES NO

CERTIFICATION SECTION

I certify that:

- The information on this form is true and correct.
- Since I have held a CPA-Inactive certificate, I have not used the title CPA in any capacity or offered or provided attest or compilation services.
- I have fully complied with the appropriate CPE requirements.
- I have attached a completed Experience Affidavit, **or**
- An Experience Affidavit is on file with the Board.

Signature: _____

Date: _____

Email To: customerservice@cpaboard.wa.gov

THE BOARD ADVISES YOU TO KEEP DETAILED COPIES OF ALL DOCUMENTATION SUBMITTED FOR YOUR RECORDS.

Please be advised: The Washington State Board of Accountancy is required to comply with the Public Records Act, [Chapter 42.56 RCW](#). The information you submit to the Board may ultimately be subject to disclosure as a public record.

Revised October 2010