



**STATE OF CONNECTICUT**  
**Department of Consumer Protection**  
**License Services Division**  
**450 Columbus Blvd, Ste 801**  
**Hartford, CT 06103**

Name & Mailing Address:

Location Address:

Indicate an email address to be used for all correspondence:

**Renewal Notice for Sterilization Permit for Bedding & Upholstered Furniture**

May 1, 2024– April 30, 2025

Indicate Connecticut Permit Number to be Renewed	Expiration Date	Total Fee Due
	<b>04/30/2024</b>	<b>\$25.00</b>

Please note, this form is only to be used for permits expiring 04/30/2024. A reinstatement form must be completed for all permits that have expired within three years of expiration or you must reapply. Information and forms are available on our website at [www.ct.gov/dcp](http://www.ct.gov/dcp).

• **Renew by Mail:** To renew by mail, complete this renewal notice and return with a check drawn on a US Bank or International Money Order for the applicable fee made payable to “*Treasurer, State of Connecticut*” and mail to the above address.

• **Renew Online:** To renew online with a credit card, go to our website at [www.license.ct.gov](http://www.license.ct.gov) and login with your User Id and Password or Fast Track Renewal information. Once you have completed the login process, select Online Services and then click Renewal to begin. If you do not have your necessary login information to renew online, email [dcp.online@ct.gov](mailto:dcp.online@ct.gov) for assistance.

• **Change in Ownership:** If there has been a change in ownership, **do not renew this permit**. This permit is non-transferable. To obtain a new application, go to our website at [www.ct.gov/dcp](http://www.ct.gov/dcp). Questions can be emailed to the Food & Standards Division at [dcp.productsafety@ct.gov](mailto:dcp.productsafety@ct.gov).

• **Late Renewal:** A total renewal fee of \$35.00 will be due if this renewal is not paid and/or received by the expiration date. If this permit is not renewed by the expiration date and you continue to practice or engage in such work, you may be in violation of the Connecticut General Statutes and subject to all penalties.

<b>Certification</b>		
I certify, under penalty of law that the information provided on this form is the truth to the best of my knowledge.		
Signature _____	Title _____	Date _____