

RENEWAL APPLICATION

**Kentucky Board of Barbering
312 Whittington Parkway Suite 110
Louisville, KY 40222**

BARBER _____

Renewal Fee \$ _____

Name _____ Home Phone _____

By _____
date

Address _____
Number and Street City County Zip

Restoration Fee \$ _____

Shop Name(Required) _____

By _____
date

Shop Address(Required) _____
Number and Street City County Zip

Renewal Period June 1 to July 1
Late fee \$25.00 after July 1

Write "NA" if not currently working in a shop

Signature

Name (please print)

Date

E-Mail Address (Used for informational purposes only)

This form must be signed and returned to the Kentucky Board of Barbering along with your license/renewal application. Your application will not be processed until this signed and dated form is received. Send Money Order, Check or Cashier's Check Only. Please note that licenses paid by check will be held for 10 working days for clearance.

SHOP RENEWAL APPLICATION

**KENTUCKY BOARD OF BARBERING
312 WHITTINGTON PARKWAY SUITE 110
LOUISVILLE, KY 40222-5055
(502) 429-7148**

Shop Name _____ License No. _____

Address _____ Shop Phone _____
Number and Street

City _____ Zip _____ County _____

Owner's Name _____

Manager's Name _____ Signature of Manager _____

IMPORTANT: Complete above application. Licenses shall be renewed beginning June 1 thru July 1 each year. The renewal fee is \$50.00. Any license application received or postmarked later than July 1, shall be considered expired and a penalty of \$25.00 plus renewal fee will be required to renew the license.