BOARD OF BARBERS & COSMETOLOGISTS
RENEWAL APPLICATION FOR BARBERSHOPS/SALONS

www.cosmetology.mt.gov
dlibsdcos@mt.gov
PO Box 200513
301 S. Park Ave. Fourth Floor
Helena, MT 59620

BARBERSHOP/SALON NAME:	LICENSE#:
ADDRESS:	
CITY/STATE/ZIP	

Please check the following license type you wish to renew:

☐ Barbershop Fee: $50.00 ☐ Salon Fee: $50.00

Your Montana Barbershop/Salon license will expire on July 1, 2008

Incomplete renewal forms will be returned and considered not received.

INSTRUCTIONS:

1. On-line renewal is available by e-check or credit card. Mail in fees are payable by check or money order made payable to: Board of Barbers & Cosmetologists. **DO NOT SEND CASH**
2. Failure to renew **prior** to **July 2, 2008** will result in your barbershop/salon license lapsing.
3. If you fail to renew by the **July 1, 2008** deadline, you may renew your license by completing the same procedure and paying the **additional** late fee of $50.00 until **August 15, 2008**. **The late fee is non-refundable and non-waivable.**

If the preferred mailing address shown above has changed, please complete the following:

Preferred Mailing Address:_____
Street City State Zip

Phone Number:_____

This is my **HOME** **BUSINESS** address
(Circle one)

<u>NOTICE** You must answer the following question:</u>**

YES **NO** (Circle one) Have any legal or disciplinary actions been instituted against you since you filed your last renewal? If so, please attach copies of the document that initiated each action and all final orders. Mont. Code An. Sec. 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation.

MILITARY EXEMPTION: Section 37-1-138, MCA, provides for the suspension of collection of license fees, the suspension of continuing education requirements, and the suspension of certain disciplinary actions for persons in military service who affirmatively request that their license be placed on inactive status. Therefore, upon receipt of verification of active military service and submission of this completed form, the Board will place such person's license on inactive status.

I certify that I have read this application and the above information is true and correct, and I have complied with all license requirements.

DATE:_____ SIGNATURE:_____

***** DEADLINE July 1, 2008 *****