

Salon License Application Disclaimer

Please Be Aware:

In January of 2018, the Board of Cosmetology is moving to a single salon license type. This means that salon licenses will no longer be issued by specific designation (cosmetologist, esthetician or nail technician). Each individual's personal license will determine what services they may offer within the salon rather than both their personal license *and* the salon license.

Therefore, if you are opening a salon now which will be offering nail and skin care services, you may apply for just one salon license. That license will change to an all-encompassing salon license in January.

With this change, any actively licensed salon manager can be the Designated Licensed Salon Manager (DLSM) of a salon; the DLSM's salon manager license type will no longer need to match the salon license type.

Questions? Send us an email at cosmetology@state.mn.us.

The Salon License Application begins on the next page.

Salon License Application

Salon licenses are issued for a period of three years.

Complete all sections and attach all required documentation.

Submit a complete application and fee payment by mail or in person to the address listed above.

Incomplete applications are returned for corrections, which will delay licensure.

Please allow for the full processing time.

Important:

- **Your license will be delayed if you fail to submit a complete and accurate application.** Incomplete or inaccurate applications are returned by standard mail for corrections or clarifications. A new processing time begins with each resubmission.
- It is your responsibility to obtain a license before your desired opening date. There is no temporary license or pending status once an application is submitted. Use the License Lookup at mn.gov/boards/cosmetology to search your salon by name. When the license is issued, your public Licensee Profile Page will appear or update almost immediately.
- A salon license does not transfer when a salon changes ownership or relocates. A new license must be obtained within 60 days of the change. This includes business structure changes and relocations within a single building or complex. Operating a salon under another owner's or location's license is unlawful as of the 61st day after the change.
- Salon licenses are expired as of the first day after the expiration date. It is unlawful to operate on an expired license. If your salon license lapses more than six months, you must reapply with a new Salon License Application.
- Use the checklist on page 9 to ensure all elements are complete. You also will find some helpful resources on that page. Once the application is complete, make a copy for your records and submit the original application by mail or in person to the Board office.

Fee Payment

Standard Processing
within 15 business days

☐ **\$350**

- Checks or money orders may be made payable to Board of Cosmetology.
- Processing time begins when application and payment are received in the Board office.
 - Fees are deposited the first business day after receipt.
- Business days do not include weekends or state determined holidays.

Questions about this application? Visit the Salon License FAQs (Frequently Asked Questions) pages at mn.gov/boards/cosmetology. If your questions do not appear in the FAQs, please email your questions to the Board office at cosmetology@state.mn.us.

Expedited Processing
within 5 business days

☐ **\$650**

License Type Sought (check only one)

☐

Cosmetologist Salon

cosmetic hair, skin, and nail care services

☐

Esthetician Salon

cosmetic skin care services only

☐

Nail Technician Salon

cosmetic nail care services only

If a salon provides nail and skin care services, but not hair care services, the salon will need a Nail Technician Salon License and an Esthetician Salon License. These are two separate licenses that require two separate and complete applications as well as two separate fee payments.

Salon Information

8/2017

Salon Legal Name <i>e.g. the full name of your corporation, LLC, LLP, or individual owner(s)</i>	
Salon DBA Name <i>DBA = Doing Business As</i>	MN Tax ID Number <i>SSN may be used for sole proprietor <u>only</u></i>
Salon Street Address* <i>include suite number If applicable</i>	City, State, Zip Code
County	Website
Phone Number	Email Address
Is this salon in a residence? ☐ Yes ☐ No	Total Number of Practitioners
*If your salon does not receive mail service, you may designate a separate mailing address below. Be mindful, however, that you are responsible for ensuring that the salon's mailing address is updated with the Board as necessary.	
Salon Mailing Address	City, State, Zip Code

For Board Office Use Only

Amount:	C/MO/R#:	Application Number:
Date Processed:	Staff Initials:	License Number:

Reason for New License Application

☐ New, never been licensed salon

☐ Ownership change

Previous license number: _____

Previous owner: _____

☐ Reapplication due to late renewal (6+ months)

Previous license number: _____

Previous expiration date: _____

☐ Salon relocation

Previous license number: _____

Previous address: _____

☐ Business structure change

Previous license number: _____

Previous expiration date: _____

Insurance Information

Insurance errors and/or missing Certificates of Insurance are the most common reasons why applications are returned for corrections. No salon can obtain a license without evidence of insurance coverage and compliance as required by law (MN Statutes 155A.29) in the form of Certificate(s) of Insurance which must be submitted with this application per MN Rule 2105.0310, subpart 2. This application will be returned if the instructions in this section are not followed thoroughly.

**Declarations, endorsements, binders, etc. are not acceptable substitutes for a Certificate of Insurance (COI).
A Certificate of Insurance is a specific document that is typically a single page.**

Professional Liability Insurance

Current, continuing professional liability insurance is required for all salons. It covers workmanship of licensees, such as injuries or damages that may arise from services provided by practitioners. Policies such as general or commercial liability do not provide this coverage and therefore will not be accepted in place of professional liability insurance.

Required for **ALL** salons:

Complete the section below and attach a Certificate of Insurance (COI) which:

- shows current professional liability coverage of at least \$25,000 per claim and \$50,000 per policy year per operator;
- explicitly lists "professional liability"; and
- lists the salon name and address exactly as are shown on this application.

Professional Liability Insurance Information:

Name of Insurance Company	
Professional Liability Policy Number	
Name of Insurance Agent	
Insurance Agent's Phone Number	

Workers Compensation Insurance

Workers compensation insurance is required for all salons that employ any person. To determine if your salon needs workers compensation, answer the following question. *Your yes/no response is **REQUIRED**:*

Will your salon have employees? This includes practitioners, receptionists, maintenance workers, etc.

☐ Yes. ☐ No.

If **YES**:

Complete the section below and attach a Certificate of Insurance (COI) which:

- shows current workers compensation coverage; and
- lists the salon name and address exactly as are shown on this application.

Contact the Minnesota Department of Labor and Industry at 651-284-5005 with any questions regarding workers compensation requirements.

Workers Compensation Insurance Information:

Name of Insurance Company	
Workers Compensation Policy Number	
Name of Insurance Agent	
Insurance Agent's Phone Number	

IMPORTANT: The above information will not be accepted on its own. Your Certificate(s) of Insurance must verify everything you provide here.

Designated Licensed Salon Manager Information

Every salon must have a Designated Licensed Salon Manager (DLSM). Along with the salon owner, a DLSM is responsible for the salon at all times, even when not present at the salon. A DLSM may be designated to one salon only.

- A licensed Cosmetologist Salon Manager may be the designated manager of a Cosmetologist Salon, an Esthetician Salon, or a Nail Technician Salon.
- A licensed Esthetician Salon Manager may be the designated manager of an Esthetician Salon.
- A licensed Nail Technician Salon Manager may be the designated manager of a Nail Technician Salon.

Designate a Licensed Salon Manager

Full Name <i>first name, last name</i>	Type of License ☐ Cosmetologist Salon Manager ☐ Esthetician Salon Manager ☐ Nail Technician Salon Manager
License Number	Expiration Date
Residential Address	

DLSM Acknowledgments

Your DLSM must sign below, acknowledging the following statement, in the presence of a notary public. Photocopied signatures will not be accepted.

"I, the Designated Licensed Salon Manager for the salon listed in this application, certify that I, with the owner, am the responsible party of this salon. These responsibilities include, but are not limited to, items A—G below."

- A. Ensuring that the salon license is current and posted.
- B. Ensuring that the active and current licenses of all employees and independent contractors (including myself) are posted.
- C. Ensuring that each practitioner in the salon is currently licensed in Minnesota for the services provided by that practitioner to customers.
- D. Ensuring that all practitioners, including nonemployees, who perform licensed services in the salon are in compliance with all provisions of MN Rules, chapter 2105 and MN Statutes, chapter 155A.
- E. Notifying the Board immediately in writing if I am no longer the designated licensed salon manager and am no longer responsible for this salon's compliance with MN laws and rules.
- F. I understand that I may personally be assessed a civil penalty of up to \$2,000 per violation of MN Statutes, chapter 155A and MN Rules, chapter 2105.
- G. I understand that I may be the designated licensed salon manager at only one salon at a time.

Printed Name of DLSM: _____

DLSM Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Signature: _____ Date: _____

Commission Expiration: _____

Notary Seal:

Diagram of Floor Plan

Prepare a diagram on page 5 that represents your salon's current layout. Refer to the example below and follow these instructions:

1. Each room must be labeled as what it is used for.
2. All codes listed below are required to be used on the floor plan diagram with the possible exceptions of C (shampoo bowl) and D (pedicure spa).
3. If applicable, you must clearly label any wall that is less than 6 feet high. (See definition of "work area" on page 5.)
4. If applicable, you must clearly label the width of any 5-foot or wider pass-through that connects two work areas. (See definition of "work area" on page 5.)
5. You may instead submit blueprints or formal drawings with all required codes and labeling added. If you choose to do so, you also must refer to the important notes at the top of page 5.

Codes to Be Used:

Do not create a custom code list or legend for your diagram. Only these codes will be accepted.

A—Chair (any style)	D—Pedicure Spa	G—Entrance/Exit	J—Sink Used for Disinfecting <i>This cannot be a shampoo bowl <u>unless</u> this is a one-practitioner salon with one hair station.</i>
B—Hand-Washing Sink	E—Work Station	H—Storage Cabinet	K—Work Surface Used for Disinfecting <i>This <u>must</u> be alongside the sink used for disinfecting (J).</i>
C—Shampoo Bowl	F—Restroom	I—Table (any style)	

Salon Floor Plan Example: This example of a clearly drawn floor plan diagram includes all required codes, A—K.

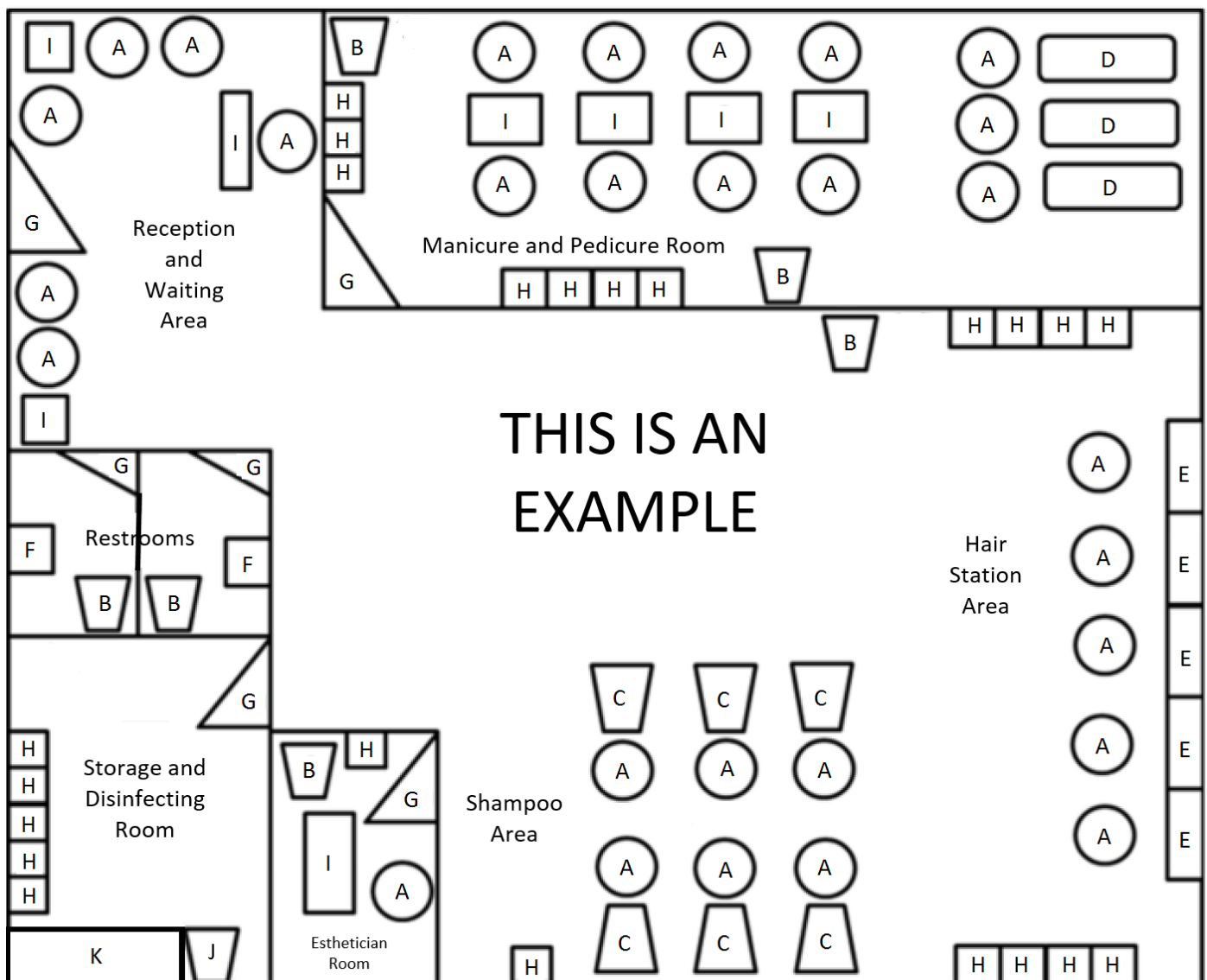


Diagram of Floor Plan (continued)

- Each square below represents 5 feet by 5 feet. If your salon is larger than 70 feet by 70 feet, attach additional pages.
- Salons may only occupy one contiguous space. This means someone (including employees and practitioners) must not need to exit the salon in order to get to any other part of the salon.
- A salon business may not share any physical space with another salon business. However, the salon's restroom(s) may be located in an adjacent common area. If this is the case, explain the location of the restroom(s) in the floor plan margins.
- WORK AREA:** A work area is defined as a space where cosmetology, esthetician, or nail services are provided. Each room where any regulated service takes place is considered a separate work area unless it is connected to another work area where the shared walls are less than 6 feet high and/or the pass-through to the room is open by 5 feet or wider and unobstructed.
- Carpeting is not an acceptable floor covering in work areas where services are provided. See MN Rule 2105.0360, subpart 4.
- HAND-WASHING SINK:** Each work area must have a hand-washing sink with hot and cold potable water; it must be equipped with liquid or foam soap, single use paper or cloth towels, and a waste receptacle or hamper for soiled towels.
 - A shampoo bowl may not serve as a hand-washing sink unless liquid hand soap, single-service towels, and a waste receptacle or closed hamper are located at the shampoo bowl; it must then must be labeled as "B/C". A pedicure tub cannot serve as a hand-washing sink.
- SINK USED FOR DISINFECTING:** Your salon must have a sink used for disinfecting the salon's tools and implements. A work surface used for disinfecting must be alongside this sink. The work surface must be sufficient in size to disinfect your salon's volume of tools and implements.
 - If the sink your salon uses for disinfecting is also that work area's hand-washing sink, label it "B/J".
 - The sink used for disinfecting may not be a shampoo bowl except for in a one-practitioner salon with one hair station, in which case it must then be labeled "C/J" or "B/C/J" if applicable.

[illegible]

Business Information

Disclose Salon's Business Structure

☐ Corporation

☐ Limited Liability Partnership

☐ General Partnership

☐ Limited Liability Company

☐ Sole Proprietor

☐ Other

Please describe: _____

Business Documentation

Locate your business type below to determine what type of business documentation is required.

	Corporation	LLC/LLP	Sole Proprietor	General Partnership	Other
Certificate of Assumed Name	✓	✓	✓	✓	✓
Certificate of Organization	✓	✓			✓

Certificate of Assumed Name

An assumed name is required for any salon doing business under a name other than the full legal name of the business owner or entity. If this applies to your salon, you must register your salon's assumed name (or DBA) with the Minnesota Secretary of State. **Once the assumed name is registered, you must attach a copy of the Certificate of Assumed Name or the online Business Filing.**

Certificate of Organization

A certificate of organization is required for any business owner or entity that is not a sole proprietor or general partnership. All businesses, except for sole proprietors and general partnerships, must register their business with the Minnesota Secretary of State. **Once the business is registered, you must attach a copy of the Certificate of Organization or the online Business Filing.**

Disclosure of Company Owners, Partners, or Officers

Provide the names, addresses, and contact information for all owners, partners, and controlling officers. All fields are required. Any individual listed is considered a partial or full owner and must also provide a notarized signature on page 8. Alternatively, for corporations, one authorized signatory may provide a notarized signature. If there are more than three owners, attach a complete list that includes all titles and contact information.

Full Name <i>first name, last name</i>	Title <i>e.g. CEO, VP</i>
Email Address	Phone Number
Postal Address	

Full Name <i>first name, last name</i>	Title <i>e.g. CEO, VP</i>
Email Address	Phone Number
Postal Address	

Full Name <i>first name, last name</i>	Title <i>e.g. CEO, VP</i>
Email Address	Phone Number
Postal Address	

Salon Owner Responsibility

Owning a Salon

- As a salon owner, you are responsible for your salon's compliance with Minnesota laws and rules. Any violation or non-compliance with MN Statutes, chapter 155A and MN Rules, chapter 2105 may result in penalty of up to \$2,000 per violation or loss of license. Copies of cosmetology laws and rules are available at mn.gov/boards/cosmetology under **Laws & Rules**.
- Salons are limited to offering cosmetology services related to the license type held. If a salon is found to offer regulated services that are outside of the scope of its license, the salon owner may be assessed civil penalties or face license revocation.
- Salons must ensure all practitioners working in the salon are currently licensed. If a salon is found to have unlicensed or expired practitioners, civil penalties or license revocations may occur. Salon and practitioner licenses may be verified online at mn.gov/boards/cosmetology under **License Lookup**.
- The current salon license and licenses of any practitioners working in the salon must be posted in plain sight. To order a duplicate or replacement license, visit **Account Services** at mn.gov/boards/cosmetology.
- After the salon receives an inspection, within 10 business days of the issuance date on the results and report, the salon must conspicuously post the inspection results in the entryway or at the reception desk of the salon, and place the detailed inspection report in the reception area so that the public may review the results.

Renewing a Salon License

- The salon license will expire on the last day of the license anniversary month in the third year. Renewal reminders are sent via email approximately 10 weeks before the license expiration date, but it is your obligation as a salon owner to renew the license whether a renewal reminder is received or not.
- Licenses can be renewed by mail or online at mn.gov/boards/cosmetology under **Online Renewals**.
- Failure to renew a license by the license expiration date will result in license expiration, late renewal penalties, and an ineligibility to offer services. Failure to renew the license within six months of the expiration date will require a new application for a new salon license.

Changes to the Salon

- If the Designated Licensed Salon Manager (DLSM) departs from the salon, you must notify the Board in writing within 10 business days. The salon has 60 days from date of departure to register a new DLSM with the Board by completing and submitting a Designated Licensed Salon Manager Change Form.
- If the salon changes names, you are required to submit a Salon Name Change Form within 60 days of the change.
- If the salon changes ownership, business structure, or location, a new salon license is required within 60 days of the change.

Salon Owner Acknowledgments

At least one owner of the salon must initial below, on behalf of the salon as a whole, in acknowledgment of each statement. For corporations, an authorized signatory may initial below. Photocopied initials will not be accepted.

- _____ A. We acknowledge that it is our responsibility to have a fire extinguisher and a first aid kit in the salon. Employees will be made aware of the location of each.
- _____ B. We certify that all hazardous substances will be inaccessible to the public through the use of closed cabinets or by otherwise prohibiting access to them.
- _____ C. We certify that all work areas contain a hand-washing sink with hot and cold potable water; equipped with liquid or foam soap, single use paper or cloth towels, and a waste receptacle or hamper for soiled towels.
- _____ D. We certify that the salon is in compliance with local building codes, local zoning codes, and the Minnesota State Fire Code. We have confirmed compliance with the appropriate authorities.
- _____ E. We certify that the salon is in compliance with OSHA regulations, which may include ventilation and eyewash station requirements.
- _____ F. We certify that this salon meets all requirements of MN Statutes, chapter 155A and MN Rules, chapter 2105.

Printed name of individual who initialed this section: _____

TENNESSEN WARNING: The data which you furnish on this application will be used by the Board to assess your qualifications for licensure. Disclosure of this information is voluntary. You are not legally required to provide this data, however if you fail to do so, the Board may be unable to process this application. While your licensure is pending, the information submitted, except your name and address, are considered private and will generally not be disclosed outside the Board. In circumstances authorized or required by law, however, it may be disclosed to others including persons contacted for purpose of verification or investigation, and the Attorney General's Office. Certain information on the application, including your Social Security number (SSN), will be provided to the Minnesota Department of Revenue at its request. If the matter of your licensure becomes contested, the information submitted on an application may become public. After issuance of a license, all information contained in this application, except your SSN, will be public information pursuant to Minnesota Statutes Chapter 13. Before the Board issues a license, individuals and businesses are required by Minnesota Statutes to provide certain data. Individuals: Social Security numbers are required by Minnesota Statutes 270C.72. Businesses: Minnesota business identification number and information requested concerning Workers Compensation Insurance are required by Minnesota Statutes. Pursuant to Minnesota Statutes 604.113 and 609.535, the Board is authorized to charge a service charge of \$30.00 for any check that is returned for non-sufficient funds.

Owner Application Certification

Each person listed in the Disclosure of Owners on page 6 and/or on any attached owner lists must provide a notarized signature below. If there are more than three owners, attach additional pages. Alternatively, for corporations, one authorized signatory may provide a notarized signature. Each owner must sign this page in the presence of a notary public. Photocopied signatures will not be accepted.

"I certify that the information submitted within this application is true and correct and that I am responsible for this salon. I also certify that this document has not been altered or changed in any manner from the form adopted by the Minnesota Board of Cosmetology. Further, I have read and acknowledge receiving the Tennessee Warning."

Owner 1

Printed Name of Owner: _____

Owner Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Signature: _____ Date: _____

Commission Expiration: _____ Notary Seal: _____

Owner 2

Printed Name of Owner: _____

Owner Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Signature: _____ Date: _____

Commission Expiration: _____ Notary Seal: _____

Owner 3

Printed Name of Owner: _____

Owner Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Signature: _____ Date: _____

Commission Expiration: _____ Notary Seal: _____

Authorized Signatory—Corporations Only

A corporation's authorized signatory may certify this document as an alternative to obtaining individual owner signatures above. The disclosure box to the right must be completed in this case.

"In addition to the statement above, I also certify that I have the legal power to sign on behalf of this corporation."

Printed Name: _____

Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Signature: _____ Date: _____

Commission Expiration: _____ Notary Seal: _____

Signatory Full Name	
Title e.g. CEO, VP	
Phone Number	Email Address
Postal Address	

Application Checklist

These checklists are provided for your personal use to help you determine if you are submitting a complete application.

Application Sections	page #	
License Type Sought	1	
Salon Information	1	
Reason for New License Application	2	
Insurance Information	2	
Designated Licensed Salon Manager Information	3	
Diagram of Floor Plan	4-5	
Business Information	6	
Disclosure of Owners	6	

Notarized Signatures and Owner Initials	page #	
DLSM Acknowledgments	3	
Salon Owner Acknowledgments	7	
Owner Application Certification	8	

Attachments and Enclosures	page #	
Fee Payment	1	
MN Tax ID Number (or SSN for sole proprietors)	1	
Certificate of Professional Liability Insurance	2	
Certificate of Workers Compensation Insurance	2	
Diagram of Floor Plan	4-5	
Certificate of Assumed Name or online Business Filing	6	
Certificate of Organization or online Business Filing	6	

Application Resources

Minnesota Board of Cosmetology

Licensing, compliance, and inspections of salons

651-201-2742 or cosmetology@state.mn.us

mn.gov/boards/cosmetology

Minnesota Department of Revenue

Tax information and filing

800-657-3777 or 651-296-6181

www.revenue.state.mn.us

Minnesota Department of Labor & Industry

Workers compensation, wages and employment

651-284-5005 or dli.communications@state.mn.us

www.doli.state.mn.us

Minnesota Secretary of State

Assumed name and business registration

877-551-6767 or 651-296-2803

www.sos.state.mn.us

Minnesota Occupational Safety & Health Administration (MNOSHA)

Employee health & safety standards

877-470-6742 or 651-284-5050

www.dli.mn.gov/mnosha.asp

Minnesota Department of Employment and Economic Development

Information on starting and managing a business

651-259-7114 or deed.customerservice@state.mn.us

www.mn.gov/deed