



Salon or School Duplicate License Request Form

Complete this form if you need a duplicate license certificate for your licensed salon or school.
Submit your complete form and fee payment by mail or in person to the address listed above.

IMPORTANT: This form cannot be used to report change of name, change of ownership, or change of location.

- If your salon has changed its name, complete and submit the Salon Name Change Form.
- If your school has changed its name, complete and submit the School Name Change Form.
- If your salon or school has changed ownership or relocated, you must apply for a new license.

Part 1: \$20 Duplicate License Fee

Enclose a check or money order payable to Board of Cosmetology or exact cash.

Part 2: Salon/School Information

Completion of all fields is required.

Part 3: Owner Certification

Your salon or school owner must sign and date where indicated.

Salon/School Information

3/2020

Salon/School Legal Name <i>e.g. the full name of the corporation, LLC, LLP, or individual owner(s)</i>
Salon/School DBA Name <i>DBA = Doing Business As</i>
Minnesota Tax ID <i>SSN or ITIN only if sole proprietor</i>
Salon/School Street Address
Salon/School City, State, Zip
Salon/School Phone Number
Salon/School Email Address
Salon/School License Number
Owner Name <i>name of individual signing below</i>
Owner Postal Address
Owner Phone Number
Owner Email Address

Owner Certification

The undersigned states that the above information is true and correct to the best of their knowledge and that this form is being submitted to obtain an additional or replacement copy of their license, not in attempt to report a change in ownership and/or location.

Owner Signature: _____ Date: _____

For Board Office Use Only	Amount:	C/MO/R#:	Processor:	Date:
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