



STATE BOARD OF COSMETOLOGY AND BARBER EXAMINERS  
 500 JAMES ROBERTSON PARKWAY  
 NASHVILLE, TENNESSEE 37243  
 (615) 741-2515, Fax (615) 741-1310

# SHOP RENEWAL FORM

BARBER SHOP

FOR OFFICIAL USE ONLY
FILE # _____
Xact # _____

**License ID Number**

# _____
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**Renewal Fee**

\$ _____
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**Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

\*Please complete all applicable items above. Failure to include all applicable information could delay processing and issuance of your license.

**Please note:** A penalty fee will be assessed, if renewal is received after expiration date.

**Renewal Fees:**

Renewal Fee:.....	\$100.00
Penalty for late renewal: (within one year).....	\$25.00
Penalty for late renewal: (more than one year).....	\$400.00
Plus for each additional year or portion thereof .....	\$200.00