ALABAMA BOARD OF COSMETOLOGY AND BARBERING
RSA UNION BUILDING, 100 North Union St., Montgomery, AL 36104
P. O. Box 301750, Montgomery, AL 36130-1750
Phone: 334-242-1918; Toll Free: 1-800-815-7453; Fax: 334-242-1926
www.aboc.alabama.gov

Online Renewal Available at *www.aboc.alabama.gov*

APPLICATION FOR ESTABLISHMENT RENEWAL 2015-2017

Renewal Fees: Shop --$100 School --$150

*** A Late fee of **$50** will be assessed if Renewal is postmarked after **October 31st** ***

MONEY ORDER, CASHIER'S CHECK or IN-STATE SHOP CHECK ONLY. **NO PERSONAL CHECKS**

Renewal Fee_____ **Late Charge**_____ **Total Enclosed**_____

Shop or School Name _____ **Phone#** _____ **Record ID #**_____

Shop or School Location _____
Street City County Zip

Shop or School Mailing Address_____
Street City State Zip

Owner _____
Name SS# Home Phone # E-mail Address

Owner's Home Address_____
Street City State Zip

2nd Owner _____
(if applicable) Name SS# Home Phone # E-mail Address

2nd Owner's Home Mailing Address _____
Street City State Zip

BY MY SIGNATURE I CERTIFY UNDER PENALTY OF PROSECUTION THAT I AM EITHER A CITIZEN OF THE UNITED STATES OR LEGALLY PRESENT IN THE UNITED STATES AND AUTHORIZED TO WORK.

Signature of Owner _____ Date _____

Signature of 2nd Owner _____ Date _____
(if applicable)

*****If More Than Two(2) Owners: Please put Information on Back of this Form Include Name, Social Security Number and Signature.*****

- **No License is Valid for a Period of More Than 2 Years**
- **Changes in Address and Ownership Must be Reported Immediately to the Board**

OFFICE USE ONLY

Ck# _____ **Py Type** _____
Fee _____ **Lt Chg** _____ **Total** _____
ACT DATE _____ **By** _____
Note:
_____

Revised 5/2015. Replaces all previous forms