



State of West Virginia  
Board of Barbers and Cosmetologists  
Telephone: (304) 558-2924  
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www.wvbbc.com

MAIL COMPLETED APPLICATION TO WVBBC – DUPLICATE REQUEST; P.O. BOX 40235, CHARLESTON, WV 25364.

## DUPLICATE LICENSE/CERTIFICATION APPLICATION

### APPLICANT NOTICE

Complete the information below in its entirety and mail this application along with a \$10.00 duplicate license/certification fee to WVBBC – Duplicate Request; P.O. Box 40235, Charleston, WV 25364. \$10.00 fee must be in the form of a check or money order. Incomplete applications will be returned.

Check/Money Order Number: \_\_\_\_\_

### APPLICANT INFORMATION

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### LICENSE/CERTIFICATION DUPLICATE TYPE

Check the box for the duplicate license/certification needed below. If more than one duplicate is needed, a \$10.00 fee must be submitted for each additional duplicate license/certification.

**Individual License/Certification or Work Permit (Circle all that apply: Barber, Cosmetologist, Barber-Cosmetologist, Nail Technician, Aesthetician, Hair Stylist or Waxing Specialist)**

Individual License Number (if applicable): \_\_\_\_\_

**Salon/Shop License**

Salon/Shop License Number: \_\_\_\_\_

Salon/Shop Name: \_\_\_\_\_

Salon/Shop Address: \_\_\_\_\_

**Instructor Certification (Circle all that apply: Barbering, Cosmetology, Nail Technology, Aesthetics, Hair Styling or Waxing)**

**Booth Registration Certificate**

Signature Field: \_\_\_\_\_

Date: \_\_\_\_\_