



State of West Virginia  
Board of Barbers and Cosmetologists  
Telephone: (304) 558-2924  
Fax: (304) 558-3450  
www.wvbcc.com

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

## LICENSE/CERTIFICATION RENEWAL APPLICATION

### APPLICANT NOTICE

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

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

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Last 4 of SSN OR License Number: \_\_\_\_\_

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

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

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

### LICENSE/CERTIFICATION TYPE

Check the box for the license/certification being renewed below. If more than one license/certification is being renewed, the applicable renewal fee must be submitted for each additional license/certification.

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

**Work Permit (Type:** Barber, Cosmetologist, Nail Technician, Aesthetician, Hair Stylist, or Waxing Specialist)  
Examination Date: \_\_\_\_\_

**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**

*\*If you are needing to change your shop/location, please complete the Booth/Chair Rental Application.*

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