



# West Virginia State Board of Barbers and Cosmetologists

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WVBBC  
1201 Dunbar Avenue  
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## SALON/SHOP OPENING AND LICENSE APPLICATION

**THIS APPLICATION SERVES AS YOUR SALON/SHOP OPENING REQUEST/NOTIFICATION, ELECTRICAL CERTIFICATION, AND LICENSE APPLICATION**

PLEASE NOTE: According to W. Va. Code, Chapter 30, Article 27 the Board shall be notified 20 days prior to opening a salon/shop.

All salons/shops need to have a private entrance with a sign, a licensed manager, proper ventilation, proper toilet facilities, covered waste containers, vacuum breakers on shampoo bowls, posted rules and regulations, and Electrical Certification verification. **IN-HOME SALONS/SHOPS** must have a separate entrance, accessible restrooms, the salon/shop and living corridors must be separated by a solid lockable door. **RULES THAT GOVERN SALONS/SHOPS ARE:** Chapter 30, Article 27 and 3CSR4 and 3CSR7.

<b>TYPE OF APPLICATION-</b> <input type="checkbox"/> New Salon/Shop <input type="checkbox"/> Owner Change <input type="checkbox"/> Location Change <input type="checkbox"/> Salon/Shop Name Change	<b>TYPE OF SALON/SHOP-check one</b> <input type="checkbox"/> Beauty <input type="checkbox"/> Barber <input type="checkbox"/> Nail <input type="checkbox"/> Barber/Beauty <input type="checkbox"/> Aesthetic/Skin <input type="checkbox"/> In-Home	<b>THE FOLLOWING INFORMATION MUST BE SUBMITTED WITH THIS APPLICATION:</b>  <input type="checkbox"/> \$90.00 fee  Copy of business registration certificate from the WV State Tax Division
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**SALON/SHOP INFORMATION**

Anticipated Opening Date

SALON/SHOP NAME  PHONE #

SHOP ADDRESS  PHONE 2

CITY  ZIP CODE  COUNTY

SHOP'S FULL MAILING ADDRESS

**OWNER/MANAGER INFORMATION** Note: If you are an unlicensed business owner, you must provide your SSN or Tax ID # in the License # field. Manager(s) must hold a valid professional license pursuant to W. Va. Code § 30-27.

OWNER'S NAME  LICENSE #  PHONE #

MANAGER'S NAME  LICENSE #  PHONE #

If this is NOT a NEW salon/shop opening application, please complete the information below about the previous salon/shop.

SALON/SHOP NAME  LICENSE #  DATE CLOSED

**ELECTRICAL CERTIFICATION STATEMENT-**This portion must be completed and signed by a licensed electrician, home inspector, city building inspector, licensed electrical inspector, or property inspector.

My signature below indicates that I am properly trained to conduct electrical inspections and my signature certifies that the shop listed above at the address listed above has a system that is safe and adequate to service the needs of the business with no apparent hazards and that the system meets all applicable standards of the National Electric Code as outlined in NFPA70.

Electrician Signature  Date Inspected

Electrician Printed Name  License #

By submitting this form electronically or physically, you are stating that you are familiar with W. Va. Code § 30-27 and the legislative rules that govern the practice of barbering and cosmetology in the State of West Virginia.

Owner Signature Field  Current Date

This form contains Personally Identifiable Information (PII). The SSN number collected within this form is to manage your license account by effectively identifying your information and will not be shared with a third-party. The information collected on this form will be securely protected through the Board's server database. By submitting this form, I agree to the policy.

Revised: August 30, 2018