



South Carolina Department of Labor, Licensing and Regulation

South Carolina Board of Cosmetology

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www.llronline.com/POL/Cosmetology/



SALON REINSTATEMENT APPLICATION

Application fees are subject to change and are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.

- Fill application out in blue or black ink only.
- Faxed applications are not acceptable.
- Remit the \$122 fee via check, money order or cashier's check made payable to: **LLR-Board of Cosmetology. Cash is not acceptable.**
- **Salon licenses are not transferrable.** If the ownership; salon name; or location of the salon has changed, this is not the correct application. You must apply for a new salon license.
- All information in this document is a public record subject to disclosure pursuant to the S C Freedom of information Act, except for items designated with this symbol (*).

Social Security Number*: _____ / _____ / _____ OR FEIN: _____ - _____
(Sole Proprietorship)

Salon Name: _____ Salon License Number: SAL _____

Salon Address: _____
Street (physical address required) City State Zip

Salon Mailing Address: _____
Street/PO Box City State Zip

Salon Email Address: _____ Telephone #: (____) _____

Manager's Name: _____ Manager's License Number (Required): _____

I am the responsible manager on file with the South Carolina Board of Cosmetology. I understand it is my responsibility to ensure compliance with all statutes and regulations of the Board.

Signature of Salon Manager

Date