

South Carolina Department of Labor, Licensing and Regulation **South Carolina Board of Barber Examiners** 110 Centerview Dr. • Columbia • SC • 29210 P.O. Box 11329 • Columbia • SC 29211-1329 Phone: 803-896-4588 • <u>BoardInfo@llr.sc.gov</u> • Fax: 803-896-4484

<u>llr.sc.gov/bar</u>

## **APPLICATION FOR PORTABLE BARBER OPERATION**

A portable barber must have a current SC Barber or Master Haircare license. An Apprentice may not be a portable barber.

Name	As it is list	ed on your SC l	Barber/Master Ha	aircare license)	):						
Licens	eense Type: Barber Master Haircare			Licen	License Number:						
Home Address:Street					<u> </u>	County:					
		Stree	t		City	State	Ζιр				
Mailin	g Address	s:									
(If differ	ent than ab	ove) Street/P	O Box	City		State		Zip			
Business Phone Number:					Othe All o	Other Contact Phone Number:					
Email Address (Required):						Last 5 digits of social:					
		· /						6 –			
Name	of Base (	<b>Operation</b> (m	ust be registered	barbershop or	mobile ba	rbershop)	:				
Registe	ered Barb	ershop/Mobi	le Barbershop	Permit Nu	nber:						
LAW	ACKNO	OWLEDGN	MENT / DIS	CIPLINE	QUEST	ΓΙΟΝS					
bee	Has any professional disciplinary action been taken against you in any state since you habecome licensed in South Carolina? (If yes, provide a detailed written explanation along any applicable documentation.)								YES	NO	
pro cri	Since you were initially licensed or since your last renewal as a Barber or Master haircare professional, have you been convicted of or pled guilty or nolo contendere to a felony or crime of moral turpitude or are there charges pending against you now that you have not disclosed to the Board?									NO	
ado	Do you understand that you must maintain a written addresses where barbering services will be provided this information to the Board upon request?									NO	
	Do you understand that you must comply with all applicable statutes and laws pertaining to YI barbering, including sanitation?								YES	NO	

I have carefully read the questions within this application and have answered them completely, without reservations of any kind, and I declare that all statements made by me herein are true and correct to the best of my knowledge and belief.

Applicant Signature:

Date: