ALABAMA BOARD OF COSMETOLOGY & BARBERING RSA Union Building   100 N. Union Street   Suite 324   Montgomery, Alabama 36104 PO Box 301750   Montgomery, Alabama 36130-1750 Phone   334 242 1918 Toll Free   1 800 815 7453	
BARBER PERSONAL LICENSE RENEWAL 2024 - 2026 **RENEW ONLINE AT WWW.ABOC.ALABAMA.GOV** NON-REFUNDABLE RENEWAL FEE: \$100 LATE FEE: \$54	
<ol> <li>INSTRUCTIONS:</li> <li>Fill out this application in its entirety.</li> <li>Enclose a business check, money order, or cashier's check payable to ABOC in the amount of \$100. If postmarked after the last day of your birth month, an additional late fee of \$54 must be included in order to process the renewal.</li> <li>Staple one 2" x 2" professional passport photo to this application (color, frontal head and shoulders view, no hats, no glasses).</li> </ol>	
Name as it appears on your license:	
Last Name First Name Mailing Address: Street or PO Box	Middle Name City State Zip Code
Mailing Address: Street of PO Box	City State Zip Code
License Number License Type	Expiration Date Date of Birth (MM/DD/YYYY)
Social Security Number Home Phone Number Work or Cell Number	
Email Address	
No license is valid for a period of more than 2	years. Ala. Code Section 34-7B-14 (a)
CERTIFICATION	AMOUNT ENCLOSED
By my signature I certify under penalty of prosecution that I am either a citizen of the United States or legally present in the United States and authorized to work. I understand that providing false	Renewal Fee: \$
informaiton on this application may result in revocation of the license and imposition of administrative penalties.	Late Fee (if applicable): \$
	Must be posted marked on or before end of birth month
	or late fee will be assessed Total Enclosed: \$
Signature of Licensee	Total Enclosed: <u>\$</u>
Date	**RENEW ONLINE AT WWW.ABOC.ALABAMA.GOV**
FOR ABOCB USE ONLY:	
ACCT DATE:	FEE:
CHECK #:	LATE CHARGE:
PMT TYPE:	TOTAL:
NOTES:	BY: