

Arizona State Board of Cosmetology
1721 E Broadway Tempe AZ 85282
Phone: (480) 784-4539 Fax: (480) 784-4962
www.azboc.gov

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|--------------------------|
| OFFICIAL USE ONLY |
| FEE RECEIVED |
| _____ |

PERSONAL DUPLICATE REQUEST FORM

Please print. Complete form and return with **\$20.00.**
FEES ARE NON-REFUNDABLE.

| | |
|--------------------------|------------------------|
| NAME: | DATE: |
| ADDRESS: | LICENSE NUMBER: |
| CITY, STATE, ZIP: | PHONE NUMBER: |

I am requesting a duplicate license(s) for the following reason:

LICENSE WAS STOLEN _____

LICENSE WAS LOST _____

WORK IN MORE THAN ONE SALON _____

MOBILE SERVICES _____

NAME AND ADDRESS OF SALONS:

SOCIAL SECURITY #

SIGNATURE

If you have a disability and require reasonable accommodations to participate in our services (including receiving this information in an alternative format) contact the ADA Coordinator at 480-784-4539.