



North Central District Health Department

- Enfield—31 North Main Street, Enfield, CT 06082 * (860) 745-0383 Fax (860) 745-3188
- Vernon—375 Hartford Turnpike, Room 120, Vernon, CT 06066 * (860) 872-1501 Fax (860) 872-1531
- Windham—Town Hall, 979 Main Street, Willimantic, CT 06226 * (860) 465-3033 Fax (860) 465-3034
- Stafford—Town Hall, 1 Main Street, Stafford Springs, CT 06076 * (860) 684-5609 Fax (860) 684-1768

**BARBERSHOP, BEAUTY SALON, NAIL SALON LICENSE
APPLICATION/RENEWAL FORM
Expires annually on December 31st
(All statements must be filled in)**

NAME OF ESTABLISHMENT _____ Phone No. _____

ADDRESS _____

HOURS & DAYS OF OPERATION: _____

Mailing Address: _____

E-Mail Address: : _____

NAME OF OPERATOR _____ Phone No. _____

COSMETOLOGIST LICENSE NO. _____ DATE FIRST ISSUED _____

ADDRESS _____

E-mail Address: _____

NAME OF OWNER _____ Phone No. _____

ADDRESS _____

E-mail Address: _____

SIGNATURE OF OWNER: _____

***** Note: There will be no refunds of Salon licensure fees.**

Water Supply: Public Water Private Well SHD

Sewage Disposal: Public Sewer Septic System: Size of Tank _____ Date Last Pumped _____

Services Provided: Barbering Hairdressing Manicures Pedicures Massage

Licensed Cosmetologist _____ CT License # _____

Licensed Cosmetologist _____ CT License # _____

Number of Stations: _____

ANNUAL LICENSURE FEE (Check Appropriate Amount)

1-6 Stations **\$175**

7-12 Stations **\$250**

13+ Stations **\$300**

Reinspection Fee (if required) **\$125**

Reinspection Fee due to Failed Inspection **\$300**

Make checks only payable to: North Central District Health Department (NCDHD)

Mail form and fee to: North Central District Health Department
31 North Main Street, Enfield, Connecticut 06082

11/27/17