



# MISSISSIPPI BOARD OF BARBER EXAMINERS

---

**“ALL NEW BARBER SHOPS OR CHANGES OF OWNERSHIP SHALL HEREAFTER PAY AN INITIAL FEE OF \$25.00 IN ADDITION TO \$15.00 PER BARBER CHAIR BEFORE BEGINNING BUSINESS. SAID FEE SHALL NOT BE TRANSFERRABLE UPON CHANGE OF OWNERSHIP.” ALL CHAIRS ADDED AFTER THE INITIAL INSPECTION WILL BE AT A CHARGE OF \$15.00 PER CHAIR.**

**PLEASE FILL OUT COMPLETELY**

DATE \_\_\_\_\_ MAIL FEE OF: \$ \_\_\_\_\_

NEW SHOP \_\_\_\_\_ CHANGE OF OWNERSHIP \_\_\_\_\_

LOCATION CHANGE \_\_\_\_\_ ADDITIONAL CHAIRS(S) \_\_\_\_\_

NAME OF BARBER SHOP \_\_\_\_\_ COUNTY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

SHOP DAYS AND HOURS \_\_\_\_\_

NAME OF SHOP OWNER \_\_\_\_\_ RACE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

NUMBER OF BARBER CHAIRS OPERATED PER DAY \_\_\_\_\_ NUMBER OF CHAIRS IN SHOP \_\_\_\_\_

SIGNATURE OF OWNER \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF INSPECTOR \_\_\_\_\_ DATE \_\_\_\_\_

**NAME OF BARBER(S) & BARBER LICENSE NUMBER**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*PLEASE GIVE DIRECTIONS ON BACK OF THIS FORM\*\*\*\*\*