



**DUPLICATE LICENSE REQUEST**  
 NORTH DAKOTA STATE BOARD OF COSMETOLOGY  
 SFN 60539 (09-2021)

- Submit completed application and fee of \$10 (per license) for a duplicate license.  
**\*\*No payment will be accepted without a complete application.\*\***

**LICENSEE INFORMATION**

Name			
Address		City	State    ZIP Code
Date of Birth	Telephone Number	Email Address	
License Number	Level <input type="checkbox"/> Master <input type="checkbox"/> Individual	License Type <input type="checkbox"/> Cosmetology <input type="checkbox"/> Esthetician <input type="checkbox"/> Manicure <input type="checkbox"/> Instructor	

<input type="checkbox"/> I hereby attest that the information stated is true and correct to the best of my knowledge.	
Licensee Signature	Date

**Submit complete application and \$10 (per license) fee to:**

ND State Board of Cosmetology  
 4719 Shelburne St Suite 1  
 Bismarck, ND 58503

**Questions:**

Email: [bocinfo@nd.gov](mailto:bocinfo@nd.gov)  
 Call: (701) 224-9800  
[www.ndcosmetology.com](http://www.ndcosmetology.com)