

**BARBER SHOP REMODEL APPLICATION**  
**THIS FLOOR PLAN MUST BE POSTED IN BARBER SHOP**

**NO FEE REQUIRED**

**ID NO.** \_\_\_\_\_

All applications Shop Name Phone No. \_\_\_\_\_  
must be

Typed or printed \_\_\_\_\_

Address City County Zip

**Barber in Charge** \_\_\_\_\_ **ID NO.** \_\_\_\_\_

**ALL SHOPS MUST HAVE A SINK AT EACH WORK STATION NOT MORE THAN 5' FROM CENTER OF BARBER CHAIR**

**A legible drawing must be completed by all applicants, including those applying for a change of ownership or change of shop name. Do not submit blueprints or other sketches.**

**NOTE: The drawing is to include: walls, windows, doors and all rooms(including restrooms, tanning & manicurist). CLEARLY LABEL ALL EQUIPMENT. All dimensions must be shown, including distance between chairs and sinks. Resident shop floor plan include shop location in relation to the living quarters. If Barber/Beauty combination, both shops must be drawn. If only renting a chair (self-employed), you must sketch entire shop and clearly indicate location of your chair.**

Owner's Name (print) \_\_\_\_\_

Owner's Signature \_\_\_\_\_ ID NO. \_\_\_\_\_

Inspector's Signature \_\_\_\_\_ Date \_\_\_\_\_