

North Carolina Board of Cosmetic Art Examiners
1201 Front Street
Suite 110
Raleigh, NC 27609
www.nccosmeticarts.com



Salon Closure

Please send original salon license also (if possible)

Salon File Number _____ Salon License Number _____

Name of Shop _____

Salon Location _____

City _____

Shop Closure Date _____

Signature of Owner or Designated Representative
