



### Tanning Establishment Renewal Form

FACILITY NAME: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\*LICENSE EXPIRES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Licenses will not be renewed sooner than six (6) weeks in advance. Renewals submitted to the Board office sooner the six weeks prior to the expiration date of the license will be returned to the licensee and will not be retained by the Board office.  
**You must notify the Board office if you have not received your license within 30 days of the date of your renewal or application submission. Failure to do so may result in a \$25 duplicate license fee.**

#### NON-REFUNDABLE FEES

The above listed tanning establishment license will soon expire. To renew your license, complete this form and return it to the Board office.

**\$ 75** fee for renewal licensure application submitted on-line or with a postmark prior to or on the expiration date of license.

**\$100** fee for delinquency licensure application submitted on-line or with a postmark within 60 days after the expiration date of license.

**\$200** fee for reinstatement licensure application submitted with a postmark within 60 days past the expiration date and one year of the expiration date of the license.

#### FEE PAYMENT \$75 /\$100/\$200 (see above)

##### Credit Card Payment \$75/\$100/\$200 (see above)

- 1). Go to the Board website: [www.kansas.gov/kboc](http://www.kansas.gov/kboc)
- 2). Select Payment Portal from the Top Menu Bar
- 3). Transaction Item = Facility Renewal Fee
- 4). Record your Order ID # from your emailed receipt below

Order ID # \_\_\_\_\_

##### Check or Money Order Payment

##### \$75/\$100/\$200 (see above)

- 1). Complete this form
- 2). Make Check or Money Order Payable to the Kansas Board of Cosmetology
- 3). Mail form and payment to the Board office at the address provided above.

#### ATTESTATION

By signing this form, I certify that I am the owner or authorized representative of this establishment, which is located at the address listed above, and request renewal of my tanning facility license and declare under penalty of perjury under the laws of the State of Kansas that the information provided is true and correct.

Owner's signature: \_\_\_\_\_  
(Type or Sign)

Date: \_\_\_\_\_

Co-Owner's signature: \_\_\_\_\_  
(Type or Sign)

Date: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**The Board is unable to accept incomplete applications. Failure to sign the attestation and/or submit the appropriate fee is an incomplete application. If a check or credit card payment is insufficient or denied, this is also viewed as an incomplete application. Either situation requires the renewal application be returned for your completion. Thereafter should you return the form with a postmark after your expiration date, a \$100 delinquent renewal fee is required.**