



TORRINGTON AREA HEALTH DISTRICT

350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790

Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail info@tahd.org ♦ Web www.tahd.org

"Promoting Health & Preventing Disease Since 1967"

LICENSE FEE _____
PAID YES NO

(Returned Check Fee \$25)

APPLICATION FOR COSMETOLOGY ESTABLISHMENT LICENSE

License Renewal Operational Change Change of Ownership New Business

PLEASE PRINT:

NAME OF BUSINESS _____

STREET ADDRESS _____ TOWN _____ ZIP CODE _____

ESTABLISHMENT PHONE # _____ FAX # _____ E-MAIL ADDRESS _____

Please Indicate Business Mailing Address If Different From Above:

MAIL TO _____ STREET ADDRESS _____

TOWN _____ STATE _____ ZIP CODE _____ PHONE _____ FAX _____

NAME OF MANAGER / OWNER _____ PHONE _____

STREET ADDRESS _____ TOWN _____

STATE _____ ZIP CODE _____

TYPE OF OPERATION (check all that apply)

- HAIR SALON \$ 55 + \$10
- BARBER SHOP \$ 55 + \$10
- NAIL SALON \$ 100 + \$10
 - Nails
 - Pedicure

ESTHETICIAN \$ 55 + \$10

Eyelash \$55 + \$10

Total Number of stations _____

WATER SUPPLY (check one)

- PUBLIC WATER
- PRIVATE WELL

SEWAGE DISPOSAL (check one)

- PUBLIC SEWER
- PRIVATE SYSTEM

HOURS OF OPERATION

MONDAY _____

TUESDAY _____

WEDNESDAY _____

THURSDAY _____

FRIDAY _____

SATURDAY _____

SUNDAY _____

Annual Licensure Fee of \$55 for Hair Salons, Barber Shops, and Esthetician, includes 1 station only, for every additional station \$10 must be added.

Annual Licensure Fee of \$100 for Nail Salon, includes 1 station only, plus \$ 10 for every additional station \$ 10 must be added.

If on Private Well

Date of last water sample _____

(Please include a current water test)

I have enclosed the appropriate licensing fee of \$ _____

APPLICANT'S SIGNATURE

DATE

Any incomplete information will delay the licensing procedure, and the owner will be subject to fines for operating without a valid license.
The Torrington Area Health District is an equal opportunity provider and employer.

Borough of Bantam, Bethlehem, Canaan, Cornwall, Goshen, Harwinton, Kent, Borough of Litchfield, Litchfield, Middlebury, Morris, Norfolk, North Canaan, Plymouth, Salisbury, Thomaston, Torrington, Warren, Watertown, Winsted

The Torrington Area Health District is an equal opportunity provider, and employer. To file a complaint of discrimination write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C., 20250-9410, or call (800) 795-3272 (voice), or (202) 720-6382 (TDD).