



**AFFIDAVIT FOR DUPLICATE LICENSE OR RENEWAL**

You must complete, sign, and have this affidavit notarized.  
Submit Online at <https://barber.nv.gov>

DATE: \_\_\_\_\_

COMPLETE NAME AND ADDRESS

PHONE: \_\_\_\_\_

\_\_\_\_\_

TYPE OF LICENSE HELD:

\_\_\_\_\_

\_\_\_\_\_

SHOP IN WHICH YOU ARE WORKING: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

\_\_\_\_\_, affiant, being first duly sworn deposes and says;  
(Full Name of Licensee)

That he/she was last licensed by the Nevada State Barbers' Health and Sanitation Board for the year of 20\_\_/20\_\_;  
and that the Aforementioned license or renewal application issued by the board was \_\_\_\_\_  
by affiant, and after diligent search affiant has been unable to locate (Lost, Misplaced, Destroyed, or Stolen)  
the aforementioned license or renewal application; that affiant has not at any time given, loaned, or transferred the  
aforementioned license or renewal application to any other person or firm for any purpose whatsoever; that affiant  
has not at any time allowed any person or firm to work under the aforementioned license; that affiant now desires  
the board to issue a duplicate license to replace or renew the aforementioned license or renewal application; that  
affiant has been advised that the Nevada State Barbers' Health and Sanitation Board has determined that a false  
affidavit in application for a duplicate license or renewal of a license by a licensee of the board is grounds for  
revocation of any license issued by the board; and that if the aforementioned license or renewal application is found  
by affiant, affiant will immediately return it to the Boards office at 4710 E. Flamingo Road, Las Vegas, NV 89121 by  
registered mail.

\_\_\_\_\_  
Signature of Licensee

Subscribed and Sworn to Before me this \_\_\_\_ day of

Signature \_\_\_\_\_

(APPLICANT)

\_\_\_\_\_, 20\_\_\_\_\_

Notary Public in and for this County of \_\_\_\_\_

State of \_\_\_\_\_