



Board of Barbers and Cosmetologists

Establishment

Application Manual

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Application for Establishment

1. Click the “Select” button to the right of the Establishment license type. Ensure you are selecting the correct option by reading the details below each license type.

Establishment

Establishment means an immobile beauty shop, barbershop, electrologist clinic, salon or similar place of business in which cosmetology, barbering, eyebrow threading, hairstyling or electrolysis is performed.

Select

2. At any time of the application, you can select the “Save for later” option to save a draft of the application that you can return to and complete at your convenience. This will ensure you don’t lose any progress you have made if you can’t complete the application in one sitting.

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Introduction

Thank you for starting your application for a license with the New Mexico Regulation and Licensing Department. This licensing portal will guide you through the licensing requirements and allow you to save your work and return to your application if you do not complete it all at one time.

This application will confirm that each individual applying meets all requirements for licensure set by either state statute or regulations governing the profession. These licensing requirements, along with continuing education, regular renewals, and compliance monitoring assist to safeguard the profession and certify that licensees meet minimum education, training, and health and safety standards to ensure public trust.

If you have further questions regarding licensure or the Regulation and Licensing Department Boards and Commissions Division, please visit the website at www.rld.nm.gov/boards-and-commissions/. Each Board and Commission have their own webpage with specific requirements for licensure, continuing education, renewals, public meeting information, and a direct phone number and email to their respective administrator and other support staff who can be reached for help.

A completed official application for an establishment license must be filed with the board at least fifteen days prior to the expected opening of the establishment. A formal inspection of the establishment must take place after the issuance of the license and opening of the establishment. When an establishment relocates within the state of New Mexico, the owner must submit an amendment request and obtain approval, including inspection from the board to operate the business at the new location, and pay the administrative fee.

If you are ready to apply, please click the Save & Next button to begin your application.



Please ensure that you are applying for the correct license, permit or exam approval. Incorrect applications or those submitted in error may result in delays or additional application fees. Please note all fees are non-refundable even if the application is denied or withdrawn.

Save for later

Next

3. On the Introduction page, read through the information and select the “Next” button on the bottom right of the screen when you are done.

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Introduction

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This application will confirm that each individual applying meets all requirements for licensure set by either state statute or regulations governing the profession. These licensing requirements, along with continuing education, regular renewals, and compliance monitoring assist to safeguard the profession and certify that licensees meet minimum education, training, and health and safety standards to ensure public trust.

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If you are ready to apply, please click the Save & Next button to begin your application.

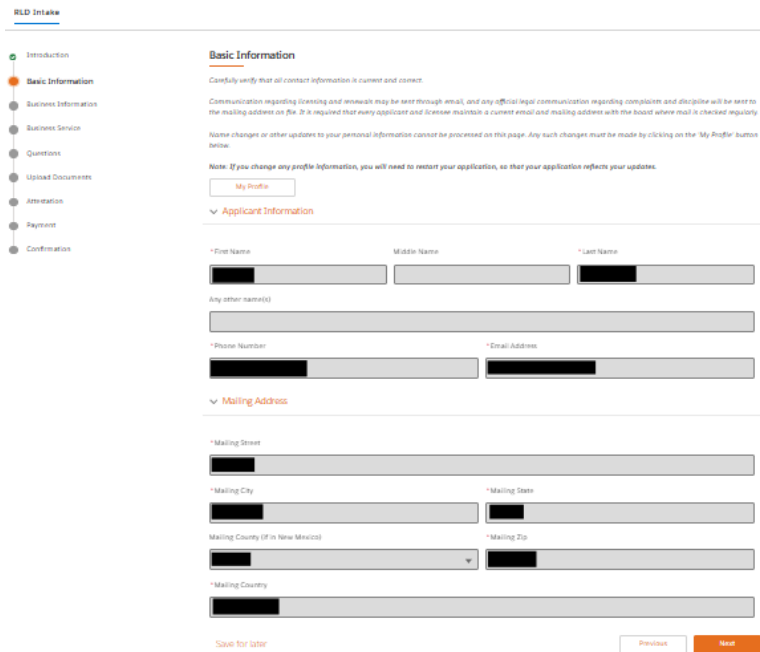


Please ensure that you are applying for the correct license, permit or exam approval. Incorrect applications or those submitted in error may result in delays or additional application fees. Please note all fees are non-refundable even if the application is denied or withdrawn.

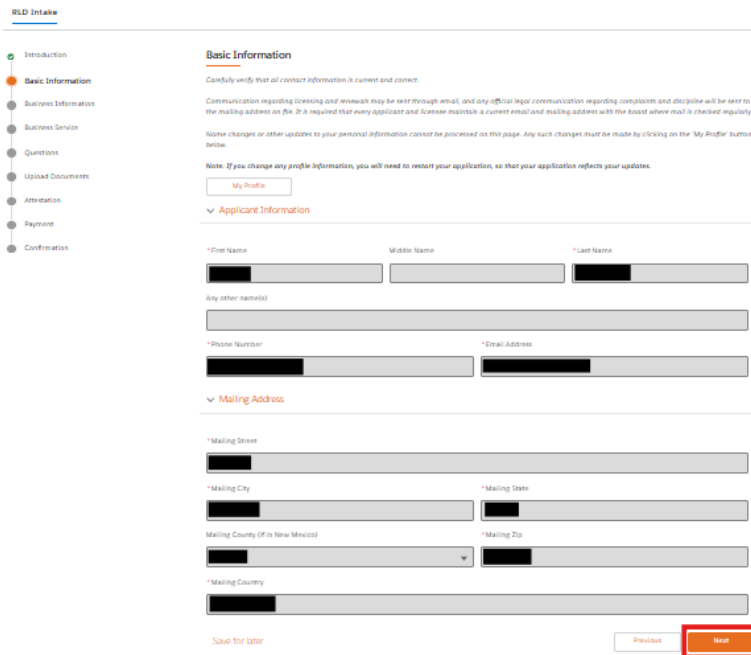
Save for later

Next

4. On the Basic Information page, verify that all information is valid and up to date.



a. If **Yes**, select the “Next” button at the bottom right of the page.



b. If **No**, select the “My Profile” button at the top left to update your information.

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Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

Applicant Information

*First Name Middle Name *Last Name

- i. Select the “Edit” button at the bottom right of the page.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

Race Ethnicity Preferred Language Are you a New Mexico Resident ?

Date of Birth Gender

Primary Phone No Business Phone No

Identifier Type Identifier Number

SSN

Mailing Address

Mailing Street

City State/Province

Country Zip Code County (If in New Mexico)

[Edit](#)

- ii. Enter in all relevant updated data and select “Save” at the bottom right when completed.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

Race Ethnicity Preferred Language Are you a New Mexico Resident ?

Date of Birth Gender

Primary Phone No Business Phone No

Identifier Type Identifier Number

SSN

Mailing Address

Mailing Street

City State/Province

Country Zip Code County (If in New Mexico)

[Cancel](#) [Save](#)

iii. You will need to restart your application to ensure the updated data is listed.
Return to “Step 1: Establishment Application” to continue.

5. On the Business Information page, please complete all required fields related to the establishment and owner information.

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Business Information

* Name of Establishment
Enter Organization Name
Please update the Establishment Name as it should appear on printed license.

* Type of Ownership
▼

* Type of Establishment/Enterprise
☐ Residence
☐ Commercial Property Building
☐ Mobile Establishment

** Specify details for each owner below. Sum of the ownership percentage for all records should be equal to 100%. If you need to view, edit or delete any records, click the down arrow under action for that specific record.*

Business Owner Name	Phone Number	Email	Ownership Percentage	
				Add New

▼ Establishment Address

* Establishment address is where you will be providing services to your clients.

* Establishment Street

* Establishment City

* Establishment Zip

* Establishment County

* Establishment Country

* Establishment State

* Is the Mailing Address same as Physical Address?

Save for later Previous Next

6. To add business ownership information, click on the orange “Add New” button under the respective section.

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Business Information

* Name of Establishment
Enter Organization Name
Please update the Establishment Name as it should appear on printed license.

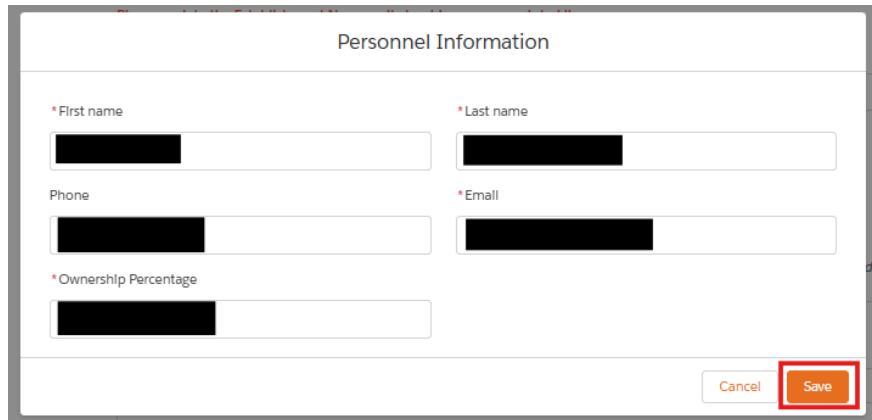
* Type of Ownership
Sole Proprietorship ▼

* Type of Establishment/Enterprise
☐ Residence
☐ Commercial Property Building
☐ Mobile Establishment

** Specify details for each owner below. Sum of the ownership percentage for all records should be equal to 100%. If you need to view, edit or delete any records, click the down arrow under action for that specific record.*

Business Owner Name	Phone Number	Email	Ownership Percentage	
				Add New

- a. Enter all required information and click “Save” to return to the Business Information page.



Personnel Information

* First name

* Last name

Phone

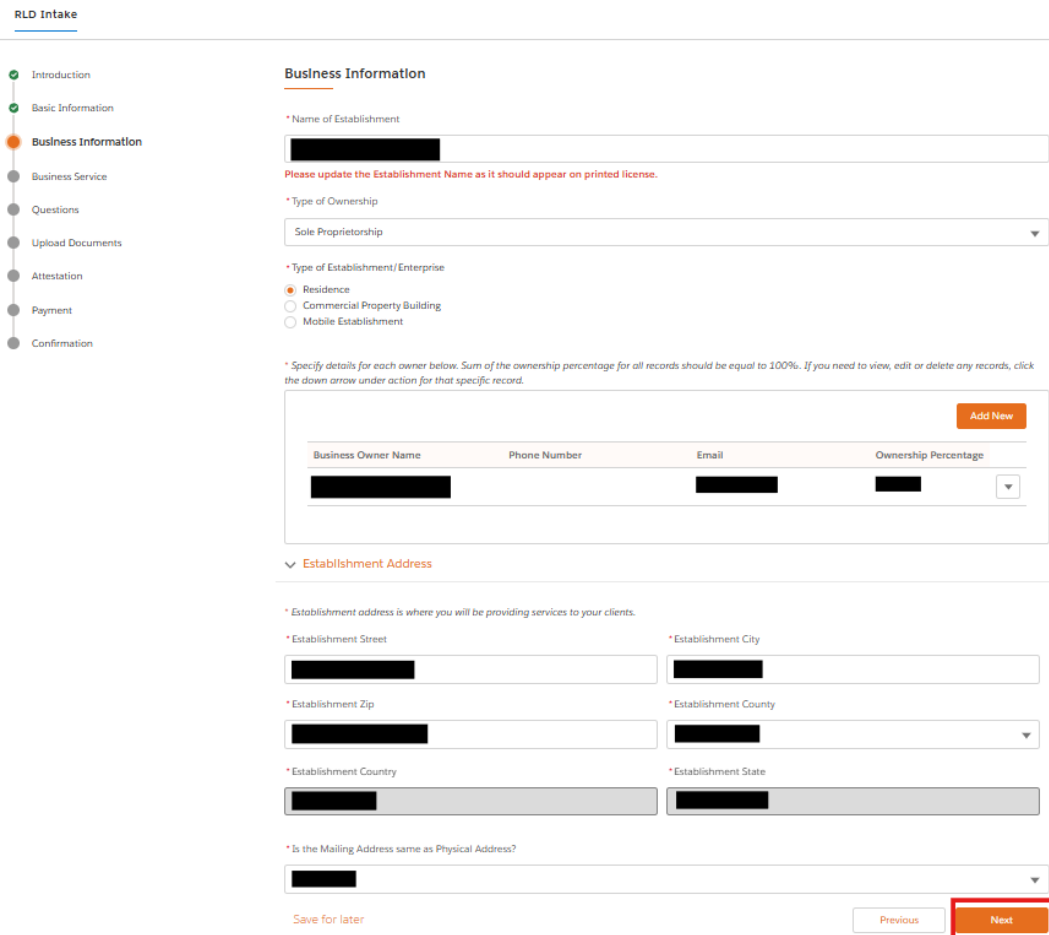
* Email

* Ownership Percentage

Cancel Save

Please Note: The sum of the owner percentages must equate to 100%.

7. Once all relevant data has been entered, click “Next” to proceed.



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Business Information

* Name of Establishment

Please update the Establishment Name as it should appear on printed license.

* Type of Ownership
Sole Proprietorship

* Type of Establishment/Enterprise
☒ Residence
☐ Commercial Property Building
☐ Mobile Establishment

* Specify details for each owner below. Sum of the ownership percentage for all records should be equal to 100%. If you need to view, edit or delete any records, click the down arrow under action for that specific record.

Business Owner Name	Phone Number	Email	Ownership Percentage	
				Add New

Establishment Address

* Establishment address is where you will be providing services to your clients.

* Establishment Street

* Establishment City

* Establishment Zip

* Establishment County

* Establishment Country

* Establishment State

* Is the Mailing Address same as Physical Address?

Save for later Previous Next

8. On the Business Service page, please check all services that will be offered at the establishment.

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Business Service

Please check all services that will be offered at the establishment?

☐ Barbering
☐ Hairstyling
☐ Esthetician
☐ Manicurist/Pedicurist
☐ Electrolysis
☐ Cosmetology
☐ Eyebrow Threading

Error: Please check all services that will be offered at the establishment? is required.

For every service you select, with the exception of Eyebrow Threading, you should specify the corresponding Supervisor who must be licensed to supervise that particular service at the establishment. Supervisors could hold any of the following licenses in New Mexico: Manicurist/Pedicurist, Electrologist, Esthetician, Barber, Cosmetologist, Hairstylist, Manicurist/Esthetician, Barber/Cosmetology, Instructor, Provisional Instructor. Supervisor means licensee designated by the owner or manager to act on behalf of the enterprise or establishment in their absence.

Save for later

Previous Next

- a. When all relevant services are checked, enter practitioner and supervisor information, and click "Next" to continue.

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Business Service

* Please check all services that will be offered at the establishment?

☒ Barbering
☐ Hairstyling
☐ Esthetician
☐ Manicurist/Pedicurist
☐ Electrolysis
☐ Cosmetology
☐ Eyebrow Threading

For every service you select, with the exception of Eyebrow Threading, you should specify the corresponding Supervisor who must be licensed to supervise that particular service at the establishment. Supervisors could hold any of the following licenses in New Mexico: Manicurist/Pedicurist, Electrologist, Esthetician, Barber, Cosmetologist, Hairstylist, Manicurist/Esthetician, Barber/Cosmetology, Instructor, Provisional Instructor. Supervisor means licensee designated by the owner or manager to act on behalf of the enterprise or establishment in their absence.

Search by entering an active Practitioner license number

*Barbering Supervisor Name

*Barbering Supervisor License Number

Save for later

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9. On the Questions page, please answer all questions accurately with the most recent information. Please provide any relevant details in the box below any questions marked with "Yes." You are also required to upload any related documentation and other supporting documents on the Uploaded Documents page, later in this application.

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- ☒ Business Service
- ☒ **Questions**
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- ☐ Confirmation

Questions

* Do you certify that you have read and will abide by the Application and Requirements rules and requirements outline in 16.34.7.8 NMAC?

☐ Yes

* Do you certify that you have read and will abide by the Infection Control and Safety Standards rules and requirements outline in 16.34.7.9 NMAC?

☐ Yes

* Has any owner(s) of the establishment ever had an application or license in this profession denied, suspended, revoked, surrendered, or had any other form of discipline or disciplinary action by a licensing board in another state or jurisdiction?

☐ Yes

☐ No

* Has any owner(s) of the establishment ever been convicted of a felony offense in any jurisdiction that would be considered a disqualifying criminal conviction, as outlined in 16.34.2.15 NMAC?

☐ Yes

☐ No

* Is any of the owner(s) of the establishment currently more than thirty days in arrears in payment of amounts required to be paid pursuant to an outstanding judgment and order for child support in New Mexico or any other state?

☐ Yes

☐ No

An establishment which submits an application for an initial license or renewal of a license is not eligible for issuance of the license if any of the owner(s) of the establishment is not in compliance with a judgment and order for support or subpoenas or warrants relating to paternity or child support proceedings.

[Save for later](#)

[Previous](#)

[Next](#)

10. To complete the Questions page, select the “Next” button at the bottom right of the page.

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- ☒ Introduction
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- ☒ Business Information
- ☒ Business Service
- ☒ **Questions**
- ☐ Upload Documents
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- ☐ Confirmation

Questions

* Do you certify that you have read and will abide by the Application and Requirements rules and requirements outline in 16.34.7.8 NMAC?

☒ Yes

* Do you certify that you have read and will abide by the Infection Control and Safety Standards rules and requirements outline in 16.34.7.9 NMAC?

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* Has any owner(s) of the establishment ever had an application or license in this profession denied, suspended, revoked, surrendered, or had any other form of discipline or disciplinary action by a licensing board in another state or jurisdiction?

☐ Yes

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* Has any owner(s) of the establishment ever been convicted of a felony offense in any jurisdiction that would be considered a disqualifying criminal conviction, as outlined in 16.34.2.15 NMAC?

☐ Yes

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11. On the Upload Documents page, attach all requested and relevant documents to their designated column if required.

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Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

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- a. Select the blue upload icon in each section to upload a document.

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Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

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- b. Review the document size and type requirements before uploading, then select the Upload File button.

Upload

Please attach a copy of the required document.

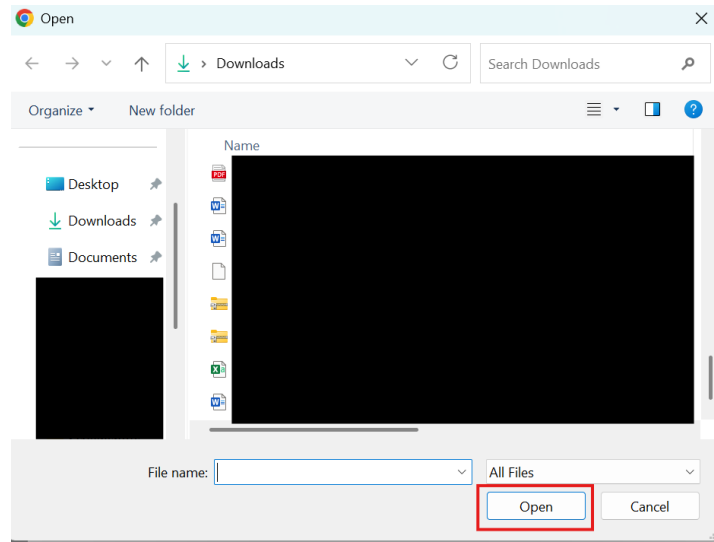
Note that:

1. File size should not exceed 10MB.
2. The extensions will be accepted only of type doc, docx, pdf, png, ppt, jpg, jpeg, tiff, xls.
3. Documents may be uploaded as individual files or as a single merged file on the next page.

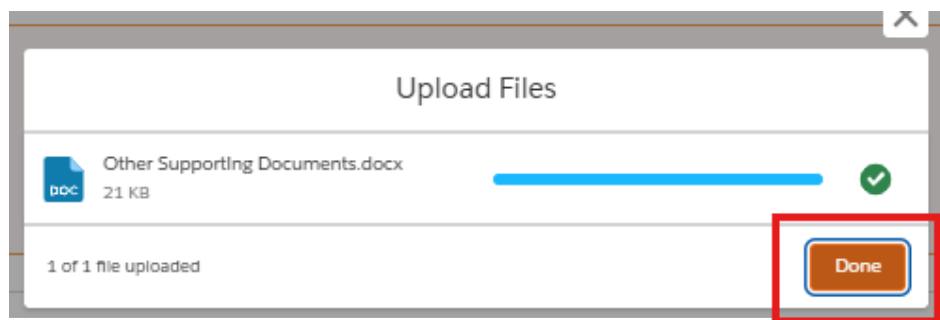


Close

- c. Select the appropriate document from your files and then select "Open"



- d. The file will notify you when it's completed. Select the "Done" button when it's completed.



- e. You will be able to see your document added and can then select the "Close" option.



- f. You will be able to see the documents in each section once you have completed the uploads.

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Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

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g. Once all documents are added, select the orange “Next” button.

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Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

Previous **Next**

12. On the Attestation page, review the statement on the screen. Then select the checkbox to certify your agreement. After, enter your name and select the “Next” button at the bottom right.

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Attestation

Application Attestation

☒ I hereby certify that I am the person described and identified in this application; this application contains no willful misrepresentation; and the information given by me is true and complete to the best of my knowledge and belief. I further certify I will, upon receipt, read the Body of the Safe Practice Act and Rules and fully understand that I bind myself to be governed by them.

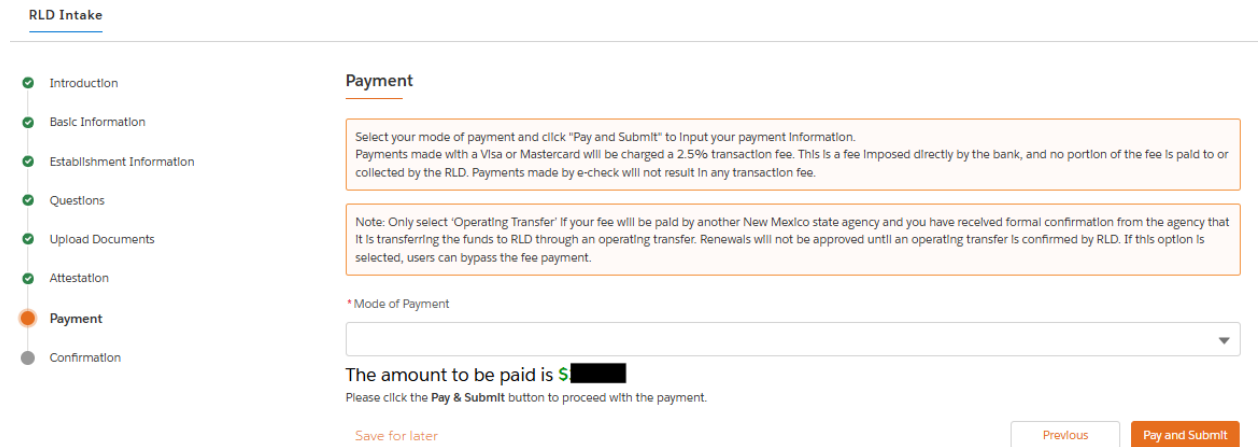
* Applicant Name

Date

Save for later

Previous **Next**

13. On the Payment page, review the notice before making any selections.



RLD Intake

Payment

Select your mode of payment and click "Pay and Submit" to Input your payment Information.
Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee Imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Note: Only select "Operating Transfer" if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.

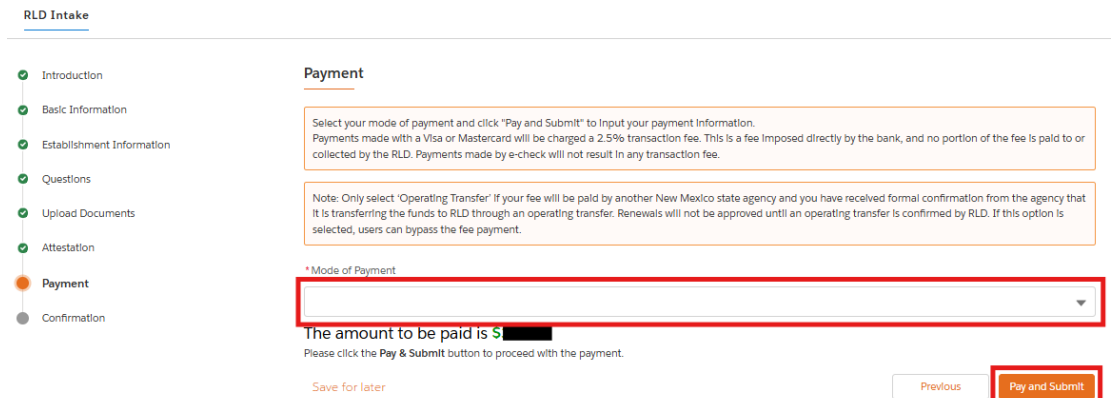
* Mode of Payment

The amount to be paid is \$ [REDACTED]

Please click the **Pay & Submit** button to proceed with the payment.

[Save for later](#) [Previous](#) [Pay and Submit](#)

- Select a Mode of Payment then the "Pay and Submit" button. When selecting either Credit Card (Visa or Mastercard) or E-Check as your payment method, a new tab will open directing you to the Cybersource Payment Gateway screen. Please disable any pop-up blockers to ensure the page opens correctly in the new tab.
- Note: Payment is a separate system and your credit card info is not stored or saved by RLD. Cybersource is a SoNM billing platform, and this is not phishing or other malware. Upon payment completion, you will receive a payment receipt to the email address you have entered in the Payment Gateway.*



RLD Intake

Payment

Select your mode of payment and click "Pay and Submit" to Input your payment Information.
Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee Imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Note: Only select "Operating Transfer" if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.

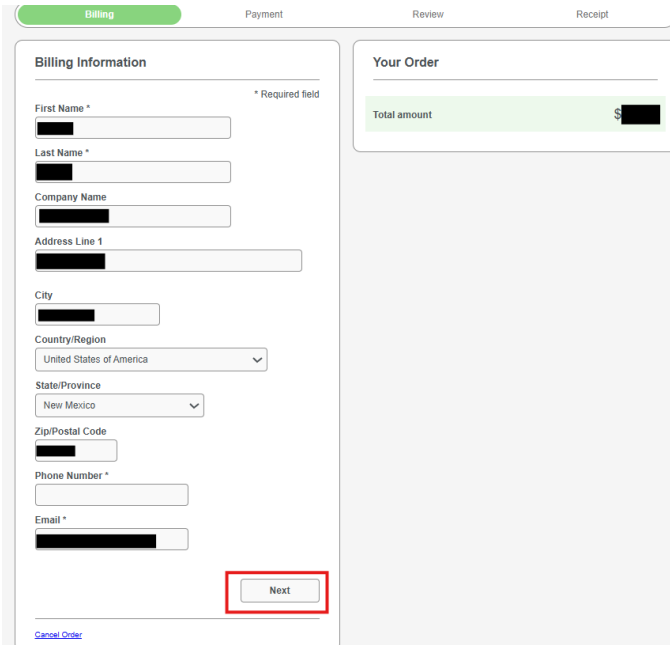
* Mode of Payment

The amount to be paid is \$ [REDACTED]

Please click the **Pay & Submit** button to proceed with the payment.

[Save for later](#) [Previous](#) [Pay and Submit](#)

- Ensure all required fields are completed and click "Next" button to proceed through entire payment.

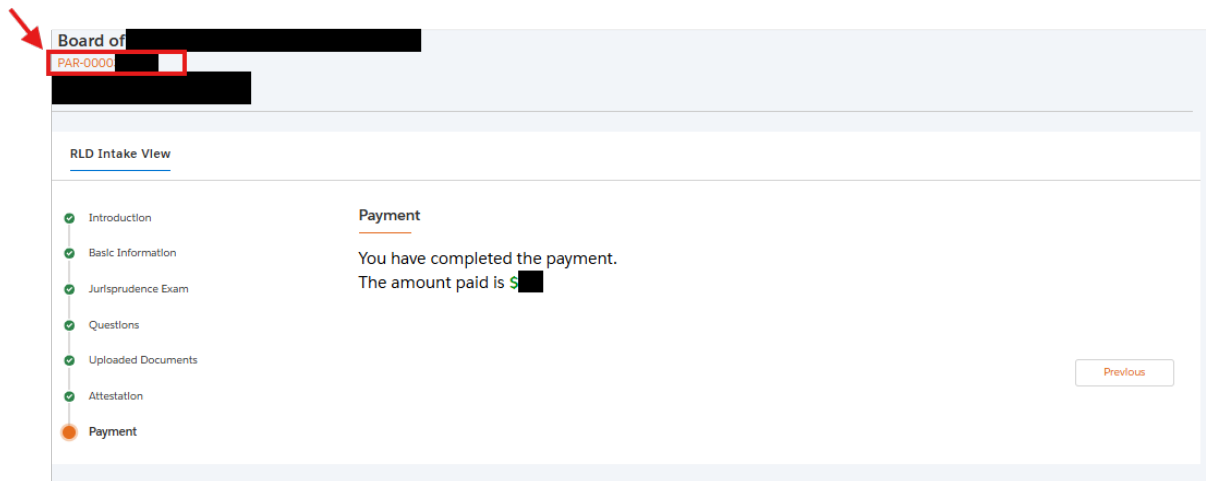


The form is titled "Billing Information" and is part of a multi-step process (Billing, Payment, Review, Receipt). It contains the following fields:

- First Name * (Required field)
- Last Name *
- Company Name
- Address Line 1
- City
- Country/Region (United States of America)
- State/Province (New Mexico)
- Zip/Postal Code
- Phone Number *
- Email *

A "Next" button is highlighted with a red box at the bottom right of the form. A "Cancel Order" link is at the bottom left.

14. Once your payment is completed, your application is now complete and will be submitted for approval. To check the status of your application, please contact your board or division directly. Please be sure to reference your application number, which begins with **PAR-** and can be found at the top of your application.



The form is titled "RLD Intake View" and shows a progress bar with the following steps:

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions
- Uploaded Documents
- Attestation
- Payment (Current step)

The "Payment" section shows a confirmation message: "You have completed the payment. The amount paid is \$[redacted]". A "Previous" button is located at the bottom right.

A red arrow points to the "Board of" field at the top of the form, which contains the application number "PAR-0000" followed by a redacted name.

15. On the home page, the application will appear under My Applications with **Submitted** status.

Licenses & Applications

My Applications

Application ID	License Type	Application Type	Applied Date	Status	Action
PAR-0000 [REDACTED]	[REDACTED]	New	10/7/2025	Draft	
PAR-0000 [REDACTED]	[REDACTED]	New	7/29/2025	Draft	
PAR-0000 [REDACTED]	[REDACTED]	New	7/28/2025	Submitted	View Review Checklist

[View All](#)