

**SOUTH RIBBLE BOROUGH COUNCIL**

**Local Government (Miscellaneous Provisions) Act 1982 S.14 - 15**

Application form for registration of skin piercing businesses

Activities to be registered for (tick for each activity)	
Tattooing	
Acupuncture	
Electrolysis	
Semi-Permanent Skin Colouring	
Cosmetic Piercing	

- 1) Name in full of person to be registered
  
- 2) Postal Address
  
- 3) Telephone number & email address
  
- 4) Name of business & address of premises where it is proposed to practice
  
- 5) Brief details of premises and facilities
  - a) Room/Part used –
  
  
  
  
  
  
  
  
  
  
  - b) Toilet/Wash-hand facilities -
  
  
  
  
  
  
  
  
  
  
  - c) Equipment to be used –
  
  
  
  
  
  
  
  
  
  
  - d) Method of sterilising equipment -

- 6) Have you been convicted of any offences under Section 16 of the Local Government (Miscellaneous Provisions) Act 1982? \*YES/ NO.

If YES, please give details, including date of conviction and fine.

- 7) Have you within the past five years suffered from any Infectious or Notifiable Disease. \*YES/ NO.

If YES, please give details.

- 8) I understand that upon registration I shall be required to abide by, take all reasonable steps to ensure compliance with, and display all byelaws concerning \*tattooing / cosmetic piercing / electrolysis / acupuncture / semi-permanent skin colouring made from time to time by the South Ribble Borough Council.

\*Please delete what is inapplicable.

- 9) If you have previously been registered with another council for skin piercing activities please provide details of your registration and the council.

Signed ..... Date .....

I enclose the registration fee of £

Below is for internal use:-

Date paid

Receipt No

Code – 113694/9356 No Vat

Finance/Gateway – Please pass to Env Health