



# LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

## Application for Registration to carry on a Skin Piercing Activity

1) Trading name of business: \_\_\_\_\_

2) Address of premises required to be registered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact number: \_\_\_\_\_ Email: \_\_\_\_\_

If applying for a **Premises** registration : Circle all treatments which will be provided at the business:

Acupuncture / Body piercing / Ear Piercing / Electrolysis / Micropigmentation / Microblading / Tattooing

If other please state: \_\_\_\_\_

### Operator(s) to be registered:

**Full name:**

**To be registered for:** State which treatment(s)

Full name:	To be registered for:

5) Description of premises, including number of rooms, and particulars of arrangements for cleansing of premises, fittings and equipment and sterilisation of instruments (*attach a separate schedule if necessary*)

\_\_\_\_\_  
\_\_\_\_\_

6) Have you previously been registered in this respect in any other district? If so, which?

\_\_\_\_\_

7) Have you ever been convicted of any offence under the Act? If so, give details

\_\_\_\_\_

If you are making a variation please contact the department first to discuss.

Premises: £216

Operator: £216 per operator  or Operator: £200 (Acupuncture or Ear Piercing with gun only)

Other fee: Variation / Name change

**Fees:** Payment is to be made online. Once you have returned your completed registration form an officer will be in touch to provide payment information.

Total fee for this application: £ \_\_\_\_\_

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Position in business: \_\_\_\_\_

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