

Wiltshire Council

Where everybody matters

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

APPLICATION FOR REGISTRATION OF PERSONS AND PREMISES CONCERNED WITH ACUPUNCTURE, TATTOOING, COSMETIC PIERCING, SKIN-COLOURING AND ELECTROLYSIS

APPLICANT DETAILS

Full Name:	
Full Postal Address:	
Telephone Number:	
Mobile Number (optional):	

DETAILS OF PREMISES TO BE REGISTERED

Full Postal Address & Trading Name:	
Telephone Number:	

DESCRIPTION OF PREMISES

Arrangements for: a. Cleansing of premises b. Fittings and Equipment c. Sterilisation of Instruments <i>(Attach separate Schedule if necessary)</i>	
Number of Rooms:	

NATURE OF ACTIVITY FOR WHICH REGISTRATION IS REQUIRED

Acupuncture	YES / NO
Tattooing	YES / NO
Electrolysis	YES / NO
Ear Piercing	YES / NO
Body Piercing	YES / NO

MEMBERSHIP OF PROFESSIONAL BODIES/TRADE ASSOCIATIONS

Give details of any memberships with professional bodies or trade associations concerned with the registered activity. For tattooists, please note how long you have been tattooing and where you were trained:

Names and Full Postal Addresses:

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FURTHER INFORMATION

Have you previously been registered in this respect in any other district?	YES / NO
Have you ever been convicted of any offence under the Act? If YES, give details:	YES / NO

DECLARATIONS

I/We enclose herewith the sum of £..... **(please refer to Wiltshire Council current fees and charges)** being the amount of the fee payable on the Licence for which this application is made

I do hereby certify that to the best of my knowledge and belief the above particulars are true

Signed:

Dated: