

Skin piercing - Additional Activity Registration

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

PLEASE ADD THE FOLLOWING ADDITIONAL ACTIVITIES TO

Premises Registration

Personal Registration

APPLICANT DETAILS OF PREMISES OR PERSONAL REGISTRATION TO BE AMEDNED.

Trading Name: (If applicable)	
Full Name:	
Full Postal Address:	
Telephone Number:	
Mobile Number (optional):	
Email address:	

ADDITIONAL ACTIVITY TO BE ADDED TO REGISTRATION

Acupuncture	YES / NO
Dry Needling	YES/ NO
Tattooing	YES / NO
Semi-permanent skin colouring	YES / NO
Electrolysis	YES / NO
Ear Piercing	YES / NO
Body Piercing	YES / NO

DECLARATIONS

1. I have enclosed full payment, the sum of £
(please refer to Wiltshire Council current fees and charges)
2. I understand that my application will not be accepted until full payment has been received.
3. I acknowledge that full payment must be made within 28 days of submission.
4. I acknowledge that payment is non-refundable should I withdraw my application.

You will be contact within 14 days to make payment or you can call 0300 456 0107

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

Signed:**Print Name:**

Dated: