

## Body Art Facility Permit Application

Pursuant to California Health and Safety Code, Chapter 7, commencing with Section 119300  
 a body art facility shall not conduct business without a valid health permit.

Facility Name \_\_\_\_\_ Phone \_\_\_\_\_

Owner(s) Name (s) \_\_\_\_\_

Facility Address \_\_\_\_\_ Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

**Mailing address (if different than above)**

Street/PO Box \_\_\_\_\_ Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

**Services provided in this facility (check all that apply):**

- Tattoo    Body Piercing    Permanent Cosmetics    Branding    Temporary Event

List all practitioners who operate in your facility. (Use back of form for more space, if necessary. Each practitioner must complete a Practitioner Registration Form and submit to this office.)

Practitioner Name (Use back of page if needed)	Mailing Address

As a condition for a health permit, the applicant shall provide the following:

1. A Copy of the facility's Infection Prevention Control Plan as required by the California Health and Safety Code, Section 119313.
2. Plans must be submitted for new construction or remodel of the facility

I declare, that to the best of my knowledge, the information I have provided is true and accurate. I also agree to conform to all conditions, orders, directions issued pursuant to the California Health and Safety Code, and all applicable County and City Ordinances. I hereby consent to inspections of this facility by Sonoma County Department of Health Services. **I also agree to notify this office within 30 days of any changes in the above information. The permit shall be posted in a conspicuous place within the facility.**

\_\_\_\_\_  
 Owner Signature

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

For office use only:

PE \_\_\_\_\_ PR# \_\_\_\_\_ Issue permit \_\_\_\_\_ Requested by \_\_\_\_\_

Comments \_\_\_\_\_

[ ] Cash [ ] Check [ ] Credit Card Trans # \_\_\_\_\_ Date rec'd \_\_\_\_\_ By \_\_\_\_\_

Amount rec'd \$ \_\_\_\_\_