



# Application for special treatments for premises and one operator

**Including tattooing, skin piercing, acupuncture, semi-permanent makeup, electrolysis**

## Business Owner Details

Applicant Name(s):

Address of Applicant(s):

Business name:

Contact telephone number:

email:

**I/we apply for registration of premises in accordance with section 14 or 15 of the Local Government (Miscellaneous Provisions) Act 1982 to carry on the practice of  
Tattooing / Skin piercing / Acupuncture / Semi-permanent make up / Electrolysis  
(delete as applicable)**

Address of where the practice or business will be carried out:

Business telephone number:

email

Have you previously been registered in this respect in this or any other district? **Yes/No**

If so, give details of registration:

Have you ever been convicted of any offence under the above Act (contravening the byelaws)? **Yes/No**

If so, give details:

Have you ever had a registration suspended or cancelled by Order of a Court? **Yes/No**

If so, give details:

## Operator Details

Operator Name:

Address of Operator:

Contact telephone number:

e mail:

Have you previously been registered as an operator or business owner in this or any other district?  
**Yes/No**

If so, give details of registration:

Have you ever been convicted of any offence under the above Act (contravening the byelaws)?  
**Yes/No**

If so, give details:

Have you ever had a registration suspended or cancelled by Order of a Court?  
**Yes/No**

If so, give details:

Please provide details of any relevant training /qualifications:

Please read and complete the following declaration;

**I declare that the answers to the above questions are to the best of my knowledge true and that if I knowingly or reckless make a false statement or omit relevant information I may be liable to prosecution.**

**Business Applicant**

Print name:

Signed

Dated

**Operator**

Print name:

Signed

Dated

**Please return the completed form with an electronic version of a colour photograph of the operator with the fee (see fees at [Tattooing and skin piercing licence - Uttlesford District Council](#))**

**Email to [licensing@uttlesford.gov.uk](mailto:licensing@uttlesford.gov.uk)**