

Environmental Health

APPLICATION FOR A TEMPORARY TATTOOING PERMIT PERMIT FEE - \$100.00

Date of Application:		
Tattoo Artist Information:		
Name: First	Last	MI
Mailing Address:		
City:	State:	Zip:
Telephone Number:	Email Address:	
Tattoo Establishment Information:		
Name of Event:		
Street Address of Event:		
Date(s) of Event:	Anticipated Date/Time for Pe	ermitting:
Tattoo Artist Signature:		
VC **APPLICATIONS CAN BE S EHREQUEST@BUNCOMBECOUNTY.OI	DATES AND TIMES SPECIFIED ON APPLIC DID AFTER THE DATE AND TIME OF EVEN UBMITTED TO BUNCOMBE COUNTY ENV RG OR IN PERSON AT 30 VALLEY ST. ASHI HER IN PERSON OR OVER THE PHONE AT	NT IRONMENTAL HEALTH AT: EVILLE, NC 28801. PAYMENT MAY BE

INSTRUCTIONS

Purpose: To allow tattoo artists to apply for tattooing permits as required in General Statutes B0A-283 and 15A NCAC 18A .3202. A separate application must be completed for each permit.

Preparation: Each tattoo artist must complete and sign a separate application for each location where he or she will engage in tattooing within the State of North Carolina. The completed application must include the full name, mailing address and signature of the tattoo artist, the name and street of the tattoo establishment, and the anticipated date of commencing operation.

Submission: The completed application must be submitted to the local health department in the county where the tattoo establishment is located at least 30 days before commencement of operation. The local health department may require payment of fees or additional information upon submission of the application.

Disposition: This form may be destroyed in accordance with Standard 8.B.6., of the *Records Disposition Schedule* published by the N. C. Division of Archives and History.