

**Local Government (Miscellaneous Provisions) Act 1982 Registration of
Acupuncture, Tattooing, Cosmetic Piercing, Semi-
Permanent skin Colouring & Electrolysis**

PREMISES REGISTRATION

SECTION 1 – PREMISES DETAILS

PART A - Name and Address of Premises to be Registered

Q1	Name of premises	
Q2	Full address of premises to be registered	
Q3	Telephone number of premises	
Q4	Email address	

PART B – Owner Details

Q5	Business owner (sole trader, partnerships, Ltd Company etc)	
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Q6	Business registered address (where applicable)	
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Q7	Telephone Number	
Q8	Email address	

PART C - Activity

Q9	Please tick each activity to be carried out at the premises:	
	<input type="checkbox"/>	Acupuncture
	<input type="checkbox"/>	Cosmetic Piercing
	<input type="checkbox"/>	Electrolysis
	<input type="checkbox"/>	Tattooing
	<input type="checkbox"/>	Semi – Permanent Skin Colouring

SECTION 2 – HEALTH, SAFETY AND HYGIENE

Q10	How will cleaning of premises and fittings be achieved?

Q11	Please list the equipment to be used on the premises:
Q12	What facilities are available for the sterilisation of non-disposable needles?
Q13	What facilities are available for maintaining personal hygiene? <i>NB Wash hand basins are required to be located within the room where the treatment/procedure will take place.</i>

SECTION 3 – DECLARATION

I DECLARE:

(tick)

- that I have read and understood the requirements of Registration;
- I enclose payment of £ being the required registration fee;
- I understand that I must inform the Licensing Authority of any changes;
- that I have read, understood and will comply with the skin piercing byelaws; and
- that the answers given are correct to the best of my knowledge and belief.

Signed:	
Print Name:	
Position:	
Dated:	

Please forward this form with the required fee to:

Food & Safety Team
South Oxfordshire District Council
135 Eastern Avenue
Milton Park
Milton

Abingdon OX14 4SB

Tel: 01235 422403

Web: www.whitehorsedc.gov.uk or www.southoxon.gov.uk

Email: env.health@southandvale.gov.uk