

1200 Spartanburg Highway, Suite 100

Hendersonville, NC 28792

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www.hendersoncountync.gov/health

Application for Tattooing Permit

1.	Date of	Application:			
2.	Tattoo A	Artist Information:			
	Name:	First:	Last:		MI:
	Mailing	Address:			
		City:	State:	Zip:	
	Telepho	one #:			
	Email Address:				
3.	Tattoo I	Establishment Information:			
	Name of Establishment:				
	Street Address:				
	Business Hours:				
	# of Tattoo Artists in Establishment:				
4.	. Anticipated Date to Begin Tattooing:				
5.	Tattoo A	Artist Signature:			
			Instructions		
Purpose:		To allow tattoo artists to apply for tattooing permits as required in General Statutes 130A-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 addre and signature of the tattoo artist, the name and street of the tattoo establishment, and the anticipated date of commen 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 <i>Records Disposition Schedule</i> published by the N. C. Division of Archives and History.			