

# Application for registration to carry on the practice of acupuncture, tattooing, earpiercing, electrolysis

Local Government (Miscellaneous Provisions) Act 1982

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To: Licensing Service, Luton Council,

Business and Consumer Services, Town Hall, Luton, LU1 2BQ

### Part 1 – Premises details

Name of premises required to be registered
Address of premises required to be registered
Description of premises
(Including number of rooms and particulars of arrangements for cleansing of premises, fittings and equipment and sterilisation of instruments)
Have you previously been registered in this respect in any other district?
Yes □
No □
Have you ever been convicted of any offence under the act?
Yes □
No □
If 'Yes' give details

# Part 2 – Applicant details

Title
(Mr, Mrs, Miss)
Name
Address
Address
Telephone number(s)
Email address
Particulars of convictions for any offence (If any)
Part 3 – Practice registration
Applying for registration to carry on the practice of:
Acupuncture □
Tattooing □
Ear piercing □
Electrolysis □
Skin piercing □

## Part 4 – Each practitioners details

Practitioner 1				
Full name(s)				
Full address				
Please tick the belo			 	
Acupuncture □				
Tattooing □				
Ear piercing □				
Electrolysis □				
Skin piercing □				
Practitioner 2				
Full name(s)				
Full address			 	
Please tick the belo	w practices which	h apply to you		
Acupuncture □				
Tattooing □				
Ear piercing □				
Electrolysis □				
Skin piercing □				

Practitioner 3			
Full name(s)			
Full address			
Please tick the below practi	ices which apply to	you	
Acupuncture □			
Tattooing □			
Ear piercing □			
Electrolysis □			
Skin piercing □			
Practitioner 4			
Full name(s)			
Full address			 
Please tick the below practi	ices which apply to	you	
Acupuncture □			
Tattooing □			
Ear piercing □			
Electrolysis □			
Skin piercing □			

Practitioner 5			
Full name(s)			
Full address			 
Please tick the below	practices which ap	ply to you	
Acupuncture □			
Tattooing □			
Ear piercing □			
Electrolysis □			
Skin piercing □			
Practitioner 6			
Full name(s)			
Full address			 
Please tick the below	practices which ap	ply to you	
Acupuncture □			
Tattooing □			
Ear piercing □			
Electrolysis □			
Skin piercing □			

#### Part 5 – Signatures

I declare this application and all supporting documents to be true and correct. I understand that if I knowingly or recklessly make a false statement or omit any material particular, I shall be guilty of an offence.

I understand that before this licence can be granted, the premises will be inspected by Environmental Health officer of Luton Council. Once the licence has been granted I will comply with the statutory provisions, byelaws and conditions to the licence.

Signature .	 	 	
Print name	 	 	
Date	 	 	

#### **Data Protection information**

#### **Privacy notice**

We take your privacy very seriously therefore we urge you to read Luton Council's privacy statements carefully because it contains important information about us and:

- the personal information we collect about you
- what we do with your information, and
- who your information may be shared with

View this <u>privacy notice</u> on our website.

# Fees for skin piercing, tattooists, acupuncture and / or electrolysis registration(s)

# Skin piercing, tattooists, acupuncture, electrolysis - premises registration £325

(This fee plus per practitioner fee)

#### Skin piercing, tattooists, acupuncture, electrolysis registration - per individual

£38

Per practitioner within premises (including new additions)

#### Skin piercing, tattooists, acupuncture, electrolysis registration

£168

Practitioner fee no premises (mobile practitioner)

#### Copy of registration or amendments to existing registration

£15.50

(Per copy of entry)