



ALLEN COUNTY
PUBLIC HEALTH

www.allencountypublichealth.org

Allen County Combined Health District

Application to Operate a Tattoo and/or Body Piercing Establishment

INSTRUCTIONS:

1. Complete the applicable sections. Make any corrections if necessary.
2. Sign and date the application.
3. Make a check or money order payable to: Allen County Health Department
4. Return check and signed application by: December 31, 2017
to: Allen County Health Department
219 E. Market St.; PO Box 1503; Lima, OH 45802
5. License Fee \$200.00 Late Fee \$50.00

TYPE OF OPERATION:

___ Tattooing ___ Body Piercing ___ Tattooing & Body Piercing

BUSINESS INFORMATION:

Name of Tattoo and/or Body Piercing Business: _____ Tax ID#: _____

Address: _____

Street

City

State

Zip Code

Phone Number: () _____

OPERATOR INFORMATION:

Name of Operator: _____

Address: _____

Street

City

State

Zip Code

Daytime Office Phone Number: () _____

Home Phone Number: () _____

Days of Operation: _____ Hours of Operation: _____

I HEREBY CERTIFY THAT I AM THE OPERATOR, OR THE AUTHORIZED REPRESENTATIVE OF THE ABOVE OPERATION AND INTEND TO COMPLY WITH ALL REQUIREMENTS ESTABLISHED BY SECTION 3730 OF THE OHIO REVISED CODE AND SECTION 3701 OF THE OHIO ADMINISTRATIVE CODE.

Signed: _____ Date: _____

FOR OFFICE USE ONLY:

Certificate No.: ___ Issued on: _____



Public Health
Prevent. Promote. Protect.

219 E. Market Street, P.O. Box 1503, Lima, Ohio 45802-1503 | Phone: 419-228-4457 | Fax: 419-224-4161

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