

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, 2019
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: _____

Application approved for license as required.

By: _____ Date: _____ Certificate No.: _____ Issued on: _____

