



RECEIVED

10-2-18

Pd. \$500.00
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APPLICATION FOR TATTOOING PERMIT

1. Date of Application: 10-2-18

2. Tattoo Artist Information:
Name: First Lisa Last O'Quinn MI M
Mailing Address: 189 Griffin Rd
City Lillington State NC Zip 27546
Telephone Number: 919 935 9572

3. Tattoo Establishment Information:
Name of Establishment: Lauren Ashley Salon
Street Address: 409 E Jackson Blvd
Business Hours: Tues - Fri 10am - 7pm
Number of tattoo artists in establishment 1

4. Anticipated Date to Begin Tattooing: 11-1-18

5. Tattoo Artist Signature: [Signature]

INSTRUCTIONS

- Purpose:** To allow tattoo artists to apply for tattooing permits as required in General Statute 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 address and signature of the tattoo artist, the name and street address of the tattoo establishment, and the anticipated date of commencing 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 7 of the *Records Disposition Schedule* published by the N.C. Division of Archives and History.

Additional forms may be ordered from: Division of Environmental Health
1630 Mail Service Center
Raleigh, NC 27699-1630
(Courier 52-01-00)