

VALE OF GLAMORGAN COUNCIL

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

**APPLICATION FOR REGISTRATION OF A PERSON
 TO CARRY OUT THE PRACTICE OF
 ACUPUNCTURE/ EAR PIERCING/ ELECTROLYSIS/ TATTOOING**

All questions must be answered unless specified

1. Full Name of Applicant

2. Address of Applicant (i.e. usual place of residence or in the case of a company or firm, the registered or principal office)

3. Telephone Number

OFFICE USE ONLY			
Date Application Received		Officers Initials	
Fee	£		
Receipt No			
Date Granted			
Licence Issued by			
Updated by			

I HEREBY MAKE APPLICATION under the provisions of the above Act for registration to carry on the business of *acupuncture/electrolysis/tattooing/ear piercing at any premises registered by the Vale of Glamorgan Council under the above Act.
*delete as appropriate

4. What procedure do you plan to carry out at the premises?

5. Name & Address of premises at which procedure is to be carried out.

6. Please list your qualifications and experience and any premises from which you have previously operated (please use a separate sheet if necessary and provide copies of relevant certificates)

7. Have you previously been registered in this respect in any other district? (please tick) If YES please state which district.	YES		District:
	NO		

8. Have you ever been convicted of any offence under the above Act? (please tick) If YES please give details	YES		Details:
	NO		

A fee of £25.00 accompanies this application.

Signature of applicant		I hereby confirm that I give my consent for this person to be registered at the above premises.
Date		Signed: _____ Date: _____

***Please Return This Form To:-
Licensing Section,
Legal & Regulatory Services, Civic Offices
Holton Road, Barry, Vale of Glamorgan
CF63 4RU.***