

Applications are to be returned to:  
**Licensing Team**  
**Public Protection**  
**Civic Offices**  
**Holton Road**  
**Barry**  
**Vale of Glamorgan**  
**CF63 4RU**  
**Tel: 01446 709105**



**Application for Registration of a Premises to Carry out the Practice of acupuncture, tattooing, semi-permanent skin-colouring, cosmetic piercing and electrolysis under the Local Government (Miscellaneous Provisions) Act 1982**

**1. Applicant details**

*(please state home address details)*

Mr  Mrs  Miss  Other

Full name

House no and Street

District

Postcode

Telephone number

**2. Which practice(s) will be carried out at the premises?**

Acupuncture  Tattooing  Electrolysis  Cosmetic piercing

Semi-permanent skin-colouring

**3. Name and address of premises to be registered.**

Name

Street

District

Postcode

Telephone number

**4. Details of Premises.**

**Describe:**

The premises, giving details of treatment rooms, other rooms used for the business and the facilities provided

Provision for cleaning the premises, fittings and equipment and sterilisation of instruments

Provision for disposal of waste, used materials, needles etc

**5. Is the premises compliant with the by-laws?**  
Yes  No

**6. Have you previously been registered in this respect in any other district?**  
Yes  No  If yes, which district?

**7. Have you ever been convicted of any offence under the above Act?**  
Yes  No  If yes, please give details.

**DECLARATION**

**I have read the by-laws relating to acupuncture, tattooing, semi-permanent skin-colouring, cosmetic piercing and electrolysis and in the event of my registration being issued I agree to comply with these regulations.**

**I enclose the relevant fee made payable to the Vale of Glamorgan Council and note that the fee is not returnable.**

**I declare to the best of my knowledge and belief the above information is correct. I understand that if I knowingly or recklessly make a false statement or omission I render myself liable to prosecution and the cancellation of my registration.**

**Signed..... Date.....**

**Print name .....**

**On behalf of (premises)**