

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (as amended) SECTIONS 14 AND 15

REGISTRATION OF PREMISES FOR PRACTICE OF ACUPUNCTURE, TATTOOING, SEMI-PERMANENT SKIN COLOURING, COSMETIC PIERCING OR ELECTROLYSIS

 Is there a sink available for use in the premises with a constant supply of hot and cold water, to be used for the cleaning equipment and environmental 	
Trading name (If applicable). Premises telephone number Mobile telephone number Email address PLEASE ANSWER THE FOLLOWING QUESTIONS: 1. Is there a sink available for use in the premises with a constant supply of hot and cold water, to be used for the cleaning equipment and environmental	
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	ES / NO
 Is there a designated wash hand basin, for the sole use of the operator, in the treatment room, with a constant supply of running hot and cold water (NB For ear and nose piercing with a hygienic piercing instrument, the basin does not have to be designated for sole use by the operator)? 	ES / NO
3. Is there suitable and sufficient sanitary accommodation for the use of the operators with its own wash hand basin with hot and cold water? YES	ES / NO
 For Ear piercing or Semi- permanent Skin Colouring, please state the make / model equipment to be used (e.g. Caflon, Finishing Touches) 	el of
5. For Acupuncture, tattooing and semi-permanent skin colouring and electrolysis, p state the method of sterilisation to be used for needles, instruments and other items of equipment (or are you using single-use, fully disposable equipment)	

6. How do you dispose of waste (swabs, needles, etc)?

I declare that my answers to the above questions are correct.

Signed Date

Once your application has been received by email/post, it will be allocated to an Officer who will contact you to discuss your application and arrange for payment of the required fee. For your information, payment of fees are processed by a member of our Service Support team. They will contact you to take payment. We accept payment by card only. No cash or cheque payments. The number you are called from may appear as caller ID not known. Please provide your daytime contact number on the form.

RETURN TO:

environmentalhealth@wirral.gov.uk

OR

Neighbourhood Services, Environmental Health Division, PO BOX 290, Brighton Street, Wallasey, Wirral, CH27 9FQ