

**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982
 SECTION 14 & SECTION 15 (as amended)**

I/WE HEREBY MAKE APPLICATION under the provisions of the above Act for registration to carry on the practice or business of **acupuncture / tattooing / semi-permanent skin colouring / cosmetic piercing / electrolysis** at the premises detailed below. (*Delete as necessary*)

1.Full name of applicant: Full name of additional applicant(s):	
2.Home address of applicant: Contact telephone number: Email: Home address of additional applicant(s): Contact telephone number: Email:	
3.Name of business to be registered:	
4.Address of premises to be registered:	
5.Business Email (if applicable):	
6.Summary of facilities, equipment etc. to be used for above purpose:	
7. Has any applicant been registered for this type of business before?	YES/NO (<i>Delete as necessary</i>) If YES, give details of who, business name, when, and which local authority?
8.Details of experience, skills, qualifications and knowledge of applicant(s):	
9. Has any applicant ever been convicted of any offence under the above Act?	YES/NO (<i>Delete as necessary</i>) If YES, please give details:
10.Have you recently spoken with a Council Health & Safety Officer about this matter?	YES/NO (<i>Delete as necessary</i>) If NO, please ring Tel. (01482) 300 301 to speak to a Health and Safety Officer in Environmental Health.

I/WE HEREBY CERTIFY that to the best of my/our knowledge and belief, the above particulars are true.

Date:Signature(s):

The form should be returned to: Environmental Health, Hull City Council, 33 Witham, Hull, HU9 1DB; or by Email: environmental.health@hullcc.gov.uk. Please note, the correct fee must be paid in full for the application to be processed.