

## KINGSTON UPON HULL ACT 1984 – SECTION 22 HAIRDRESSERS AND BARBERS

I/WE HEREBY MAKE APPLICATION under the provisions of the above Byelaws for registration to carry on the business of a hairdresser or barber.

| 1. | Full name of applicant:  | Mr/Mrs/Miss (Delete as necessary) |
|----|--|-----------------------------------|
|    |  |                                   |
|    | Full name of additional applicants:  |                                   |
| 2. | Home address of applicant:<br>Contact telephone number:<br>Email:  |                                   |
|    | Home address of additional applicants:<br>Contact telephone number:<br>Email:                            |                                   |
| 3. | Form of business ownership (e.g. sole<br>trader, partnership, limited company).<br>Provide full details: |                                   |
| 4. | Address of registered office (if applicable):  |                                   |
| 5. | Business trading name:   |                                   |
| 6. | Business address:  |                                   |
| 7. | Business Email and telephone contact ( <i>if applicable</i> ):   |                                   |

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

Date: .....Signature(s) .....

This form should be returned to:

- Environmental Health, Health & Safety, Hull City Council, 33 Witham, Hull, HU9 1DB or by email to:
- <u>environmental.health@hullcc.gov.uk</u>