

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982
REGISTRATION OF PREMISES
TO CARRY ON THE PRACTICE OF
ACUPUNCTURE, TATTOOING, EARPIERCING OR ELECTROLYSIS



To: Woking Borough Council, Environmental Health Service, Civic Offices, Gloucester Square, Woking, Surrey GU21 6YL

I/We hereby make an application under the provisions of the above Act to register the following premises in which the following activities can be carried out:

- Electrolysis
 Ear piercing
 Acupuncture
 Tattooing
 (Please tick all those that apply)

Name of premises:	
Address of premises:	
Telephone number:	
Fax number:	
E-mail address:	
Number of Treatment Rooms:	
What arrangements are in place for cleaning the premises?	
What facilities are in place for cleaning equipment?	
Are disposable needles/instruments used?	
If no, what facilities are available for the sterilisation of non-disposable needles?	
What facilities are available for maintaining personal hygiene?	
Please provide any other information you think may assist your application. (Please continue on separate sheet if necessary.)	

Please provide your email address if you would like to be notified of the outcome of your application by email (as well as receiving a paper copy of the licence if your application is successful)? _____

A fee of £ _____ accompanies this application

Signed: _____ Date: _____

Print Name: _____ Position: _____

Payment			
You can pay the licence fee by enclosing a cheque made payable to Woking Borough Council or by supplying your card details below.			
Card number			
Expiry date		Issue number (if applicable)	
Cardholder's name (as shown on the card)			
Cardholder's statement address (including postcode)	----- -----		
Daytime telephone number (not a mobile)			
Authorised amount	£	Is a receipt required?	Yes ** No **
Cardholder's signature			

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