

Application for Beauty and Body Art Premises – Skin Penetration

APPLICANT DETAILS

Full name:			
Business name:			
ABN:			
Physical address of Business:	No.:	Street name:	
	Suburb:		Post code:
Postal Address:			
Phone numbers: (M)		(W)	
Email:			

INTENDED USE OF THE PREMISES

<input type="checkbox"/> Hairdresser	<input type="checkbox"/> Beauty Therapist	<input type="checkbox"/> Tattooist	<input type="checkbox"/> Body Piercing	<input type="checkbox"/> Nail Spa
<input type="checkbox"/> Other (please specify) _____				

CHECKLIST OF REQUIRED INFORMATION TO BE INCLUDED WITH THIS APPLICATION:

- ☐ Plan layout of premises
- ☐ List of equipment (fridge, storage cabinet, etc.)
- ☐ List of facilities (hand washing facilities, sink, etc.)

Declaration: I, the person making this application declare that:

The information contained in this application is true and correct in every particular;

Signature of Applicant: _____ Date: _____

In the case of a company, please state your position _____

SCHEDULE OF FEES -The following fees are payable after application, an invoice will be issued.

Application Fee: \$ 178.00