



NEW HANOVER COUNTY

PUBLIC HEALTH

ENVIRONMENTAL HEALTH SERVICES

230 Government Center Drive, Suite 140, Wilmington, NC 28403

P: (910) 798-6667 | F: (910) 798-7815 | NHCgov.com

Phillip E. Tarte, MHA, Director

SR # _____
EV# _____
Paid \$ _____

Body Art Application

- Type of Permit:**
- | | |
|---|---|
| <input type="checkbox"/> TATTOO | <input type="checkbox"/> NEW (SR) (<i>New artist or new location</i>) |
| <input type="checkbox"/> BODY PIERCING | <input type="checkbox"/> EXISTING (EV) (<i>Same artist and same location</i>) |
| <input type="checkbox"/> SECONDARY PERMIT | <input type="checkbox"/> TEMPORARY ARTIST (<i>Operate 2 weeks or less</i>) |

1. Artist Information:

Name of Applicant _____

Mailing Address _____ City _____ State ____ Zip _____

Phone _____ Email _____

Date of Birth _____ *List the hours you work beside the appropriate day of the week:*

Mon _____ Tues _____ Weds _____ Thurs _____ Fri _____ Sat _____ Sun _____

Date of last bloodborne pathogen training (attach a copy) _____

2. Studio Information

Water Provider:

- CFPUA Water
 Community Well
 Private Well
 Aqua Water

Sewer Provider:

- CFPUA Sewer
 Community System
 Private Septic
 Aqua Sewer

Name _____

Address _____ City _____ State ____ Zip _____

Phone _____ Business Hours _____

3. Studio Owner Information

Name _____

Address _____ City _____ State ____ Zip _____

Phone _____

Signature _____ Date _____

“Healthy People, Safe Environment, Strong Community”

Instructions

- Purpose:** To allow artist to apply for permits as required in general Statutes 130A-283 and 15A NCAC 18A .3202. A separate application must be completed for each permit.
- Preparation:** Each artist must complete and sign a separate application for each location where he or she will practice within New Hanover County. The completed application must include the full name, mailing address and signature of the artist as well as the street of the studio/establishment.
- Submission:** **The completed application must be submitted to the New Hanover County Health Department 30 days before commencement of operation.** The Health Department requires payment of fees or additional information upon submission of the application.
- Disposition:** This form may be destroyed in accordance with Standard 8.B.6. of the *Records Disposition Schedule* published by the North Carolina Division of Archives and History.