

**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 S.15 (as amended)**  
**Application for Registration to Carry on the Business of Ear Piercing**

To: Salisbury District Council  
 Environmental Services  
 PO Box 2126  
 Salisbury  
 SP2 2DJ

I hereby make application under the provisions of the above Act for registration to carry on the business of Ear piercing at the premises detailed below:

Please provide answers to the following questions:

1. Name of applicant.....
2. Address of applicant.....
3. Address of premises.....
4. Telephone number of premises.....
5. Type of premises (for example, hairdresser, beauty salon, domestic).....
6. Type of piercing given (for example, ear, nose, navel).....
7. If ear piercing ONLY what type of system is used (for example, Studex 75).....
8. Please tick boxes relevant to your premises

Separate client treatment area	<input type="checkbox"/>	Autoclave	<input type="checkbox"/>
Wash hand basin	<input type="checkbox"/>	Operator immunisation	<input type="checkbox"/>
Equipment washing sink	<input type="checkbox"/>	Single use equipment	<input type="checkbox"/>
Sanitary facilities for operator	<input type="checkbox"/>	Clinical waste collection/ contract	<input type="checkbox"/>

9. Please provide details of formal training/ qualifications achieved  
 .....
10. Have you ever been registered in any other district? If yes please provide details  
 .....
11. Have you ever been convicted of an offence under the Act in relation to piercing, tattooing, acupuncture or electrolysis? If Yes please provide details  
 .....

I can confirm that the above answers are correct and by signing this registration form I agree to comply with the byelaws made under this Act to secure the cleanliness of the premises, cleanliness of the operator and cleanliness of equipment.

Signed.....

Date.....

PURN: 0500/06



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