



**Application for Registration to Carry on the Business/Practice\*  
Of Acupuncture, Tattooing, Cosmetic Piercing (including the ear), Semi-Permanent skin-colouring (including micro pigmentation, semi-permanent make up and temporary tattooing) and Electrolysis**  
*Local Government (Miscellaneous Provisions) Act 1982*

To:

*[Insert name and address of the Council in whose area the premises is located]*

I/we ..... *[insert name(s)]*  
wish to make application under the above Act for registration to carry on the

Business        
Practice     

of acupuncture, tattooing, cosmetic piercing (including the ear), semi-permanent skin colouring (including micro pigmentation, semi-permanent make up and temporary tattooing) or electrolysis at the premises detailed below.

1. Address(es) of Applicant(s) (usual place(s) of residence or, in the case of a Company or firm, the registered or principal office.

Contact Telephone Number:

2. Address of premises required to be registered *[if this is a registration of a person only, leave blank]*

3. Number of rooms, and arrangements for cleansing of premises, fittings and equipment and sterilisation of instruments, health and safety checks (attach separate sheet if necessary) *[if this is a registration of a person only, please leave blank]*

4 Details of training/experience of applicant(s) and the treatment that they offer.

Applicant 1

Applicant 2

Applicant 3

Applicant 4

5 Head Office Details (or the registered or principal office including telephone numbers)

6 Have you previously been registered for these activities in any other district? YES/NO

If YES please give details

7 Have you ever been convicted of any offence under the Act? YES/NO

If YES please give details

I enclose the fee (*made payable to East Northamptonshire Council*) of:

£203.00 for a Business Registration

£47.00 for a Personal Registration

Signed: .....

Dated: .....

Print Name: .....

**Northamptonshire Licensing Partnership**  
**East Northamptonshire Council**  
**East Northamptonshire House**  
**Cedar Drive**  
**Thrapston**  
**Northamptonshire NN14 4LZ**  
**Tel: 01832 742066**  
**Fax: 01832 742192 DX: 701611 Thrapston**  
**Email: [licensing@east-northamptonshire.gov.uk](mailto:licensing@east-northamptonshire.gov.uk)**  
**Website: [www.northantslicensing.gov.uk](http://www.northantslicensing.gov.uk)**