

Body Art - Temporary Permit Artist Application

Type or print clearly - Incomplete applications will be denied **Event Information** Name of Event: **Event Location:** Event Date(s): **Event Hours: Applicant Information** Name of Artist: Billing Address: City, State ZIP Code: Best Contact Phone #: **Email Address:** □ TATTOO ☐ BODY PIERCING ☐ PERMANENT MAKE-UP Body Art Type: Name of shop you are affiliated with: **Equipment Information** Type of Instruments to *Spore test must be conducted within 30 days of □ Disposable ■*Non-disposable the event and be available at your workstation. be used: Instrument Manufacturer(s): Type of Sanitizer: □Chlorine □Quaternary □Ammonium □Phenol-based □Other **Required Documentation** our application wil without these items Submit one of the following with application: **not** be processed ☐ Valid SNHD Body Art card #_ Expiration date:_ ☐ Experience Verification Form with at least six (6) months of experience ☐ Body art license from another state issued more than six (6) months prior to submitting application ☐ Business license for tattoo, permanent make-up, or body piercing issued more than six (6) months prior to submitting application and must have applicants name on it. If there is no event coordinator, then the following must be submitted with application: □Client Consent Form □ Aftercare Instructions **Artist Fees** Applications & required documentation must be <u>ALL PERMIT FEES ARE NONREFUNDABLE NO</u> received no later than **EXCEPTIONS.** thirty (30) days prior to the event -\$1**84**.00 Fee with thirty (30) days advance notice No Exceptions. Send Application & ALL required documentation to: **Questions? Contact** ▶ Email bodyart@snhd.org Fax (702)759-1486 An Special Programs at (702) 759-0676 invoice will be emailed once the application paperwork is processed. The operator is responsible for meeting all requirements as set forth in the applicable sections of the Southern Nevada Health District Regulations Governing the Sanitation of Body Art Establishments. http://www.southernnevadahealthdistrict.org/body-art/regulations.php I UNDERSTAND THAT FAILURE TO COMPLY WITH ALL APPLICABLE REGULATIONS MAY RESULT IN IMMEDIATE REVOCATION OF THE BODY ART ARTIST SPECIAL EVENT HEALTH PERMIT.

Date:

Revised: July 14, 2022

Artist Signature: