

GASTON COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

991 West Hudson Boulevard • Gastonia, North Carolina 28052 704-853-5200 • www.gastonhhs.org

Tattoo Artist Application

1. Date of Application:			
2. Tattoo Artist Information:			
Name: First		Name: Last	
Mailing Address:	City:	State:	Zip:
Telephone Number:			
3. Tattoo Establishment Information: Name of Establishment:			
Street Address:			
Business Hours:			
Number of Tattoo Artists in Establishment:			
4. Anticipated Date to Begin Tattooing:			
Tattoo Artist Signature Printed (see below on line)			

INSTRUCTIONS:

Purpose: To allow tattoo artists to apply for tattooing permits as required in General Statutes 130 A-283 and 15 A NCAC 18A .3202. A separate application must be completed for each permit.

Preparation: Each tattoo artist must complete and sign a separate application for each location where he or she will engage in tattooing within the State of North Carolina. The completed application must include the full name, mailing address and signature of the tattoo artist, the name and street of the tattoo establishment, and the anticipated date of commencing operation.

Submission: The completed application must be submitted to the local health department in the county where the tattoo artist establishment is located at least 30 days before commencement of operation. The local health department may require 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 N.C, Division of Archives and History.

Additional Forms may be ordered from: Environmental Health 1632 Mail Service Center Raleigh, NC 27699-1632 Courier 52-01-00

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