



**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT, 1982
APPLICATION FOR REGISTRATION TO CARRY ON THE BUSINESS OF
TATTOOING**

| | |
|--|-------|
| 1. Your personal details | |
| TITLE (delete as appropriate): Mr, Mrs, Miss, Ms, Other (please state) | |
| Surname | |
| Forenames | |
| Telephone Numbers: | |
| Daytime | |
| Evening | |
| Mobile | |
| Give details of any previous conviction under the Local Government (Miscellaneous Provisions) Act 1982, Section 15. | |
| | |
| If registered under Section 16 with another local authority please give details below | |
| | |
| Give brief details of relevant qualifications and experience (if any) | |
| | |
| 2. Premises details (Please note the Act requires separate registration for the premises) | |
| Address | |
| Post code | |
| 3. Declaration | |
| I have enclosed the fee of £ | |
| The information contained in this form is correct to the best of my knowledge and belief. | |
| Signature: | Date: |

This form should be returned to: Head of Public Health and Community Development, Wealden District Council, Vicarage Lane, Hailsham, East Sussex, BN27 2AX