



**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982
LOCAL GOVERNMENT ACT 2003**

Application for Personal Registration

I HEREBY MAKE APPLICATION under the provisions of the above Acts for personal registration to carry on the following activity(s):

- | | | | |
|--------------------------|--------------------------|---|--------------------------|
| Practice of Acupuncture | <input type="checkbox"/> | Business of Semi-permanent Skin Colouring | <input type="checkbox"/> |
| Business of Tattooing | <input type="checkbox"/> | Business of Cosmetic Piercing | <input type="checkbox"/> |
| Business of Electrolysis | <input type="checkbox"/> | <i>(please tick those that apply)</i> | |

at the premises detailed below: -

1. Name of Applicant (in full)	Mr / Mrs / Miss / Ms
2. Home Address of Applicant	
3. Email	
4. Telephone Number(s)	Home: Mobile:
5. Date of Birth	
6. Place of Birth	
7. Address of business premises where activity to be undertaken	
8. Telephone number of business premises	
9. Have you previously been registered under these Acts in any other district? If so, provide district and registration details	

<p>10. Have you ever been convicted of any crime or offence? If so, give details</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>11. Provide details of any applications under the Acts that have been granted and revoked, explaining circumstances as to the revocation of the registration.</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>12. Provide details of any applications that have been refused under the Acts.</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>13. Particulars of qualifications, and details of certificate accreditation. Please provide a copy of each certificate. Original certificates may be required for inspection when routine Health and Safety Inspections are carried out.</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>14. Are you a member of a professional body or association? Please provide details.</p>	<p>.....</p> <p>.....</p> <p>.....</p>

Date

Signed

Please return the completed application form to the following office: Environmental Health, Richmondshire District Council, Mercury House, Station Road, Richmond, North Yorkshire, DL10 4JX together with the current application fee made payable to Richmondshire District Council.

In case of any queries please contact 01748 829100.