

Alamance County Health Department
Environmental Health Division
209 N. Graham-Hopedale Road
Burlington, NC 27217
PHONE: 336-570-6367 Email: EH.admin@alamancecountync.gov FAX: 336-570-6362
www.alamancecountync.gov

APPLICATION FOR TATTOOING PERMIT

\$200.00 NO REFUNDS

Date of Application: _____

Tattoo Artist Information:

Name: First _____ Last _____ MI _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Email: _____

****Temporary Tattooing Permit** (Tattoo permit for a limited time issued for a special event or class in a location that is not a permanent tattoo facility) **\$75.00** **The completed application must be submitted to the local health department at least 15 days before commencement of operation.

Dates: Begin: _____ End: _____

Name and Purpose of the event: _____

Location of event: _____

Tattoo Establishment Information:

Name of Establishment: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Telephone Number: _____

Business Hours: _____

Number of Tattoo Artist in Establishment: _____

Business Email: _____

Tattoo Facility Managers Name: _____

Anticipated Date to Begin Tattooing: _____

Tattoo Artist Signature: _____

*The completed application must be submitted to the health department at least 30 days before commencement of operation.