412 West Kinne Street, P O Box 238
Ellsworth, Wisconsin 54011
(715) 273-6755, (715) 273-6854 FAX

2011/2012

For Office Use Only:
ID Number _____
Check Number _____
Permit Number _____
Date _____
Initials _____

TATTOO & BODY PIERCING FACILITY PERMIT APPLICATION

PLEASE CHECK ONE: ☐ New Establishment ☐ Change in Ownership ☐ Name Change **Only** ☐ Duplicate License

Establishment Name	
Establishment Address	STREET
	CITY STATE ZIP
Establishment Telephone	( )
Legal Licensee Name	
Licensee Address	STREET
	CITY STATE ZIP
Licensee Telephone	( ) **email address:**
Primary Contact	NAME PHONE NUMBER
Secondary Contact	NAME PHONE NUMBER
Previous Establishment Name	

Type of Establishment

TATTOO:	BODY PIERCING:	COMBINED TATTOO & BODY PIERCING FACILITIES:
☐ $144 - Annual Permit	☐ $144 - Annual Permit	☐ $234 - Annual Permit
☐ $168 - Pre-Inspection (Existing Facility)	☐ $168 - Pre-Inspection (Existing Facility)	☐ $234 - Pre-Inspection (Existing Facility)
☐ $213 - Pre-Inspection (New Construction)	☐ $213 - Pre-Inspection (New Construction)	☐ $279 - Pre-Inspection (New Construction)

MISCELLANEOUS FEES:

☐ $15 - Duplicate License ☐ $25 - Name Change Only ☐ $ 100 – Consultation Fee

Make check payable to Pierce County Public Health Department and mail to above address.

Note: Application & fees must be submitted at least 14 days prior to operation or a $100 late fee may apply.

1) Legal Name of Licensed Practitioner: _____ **Certificate Number:** _____
☐ Tattooist ☐ Body Piercer ☐ Both

2) Legal Name of Licensed Practitioner: _____ **Certificate Number:** _____
☐ Tattooist ☐ Body Piercer ☐ Both

3) Legal Name of Licensed Practitioner: _____ **Certificate Number:** _____
☐ Tattooist ☐ Body Piercer ☐ Both

When is your facility open for business? ☐ Year Round ☐ Winter ☐ Summer

Intended Opening Date for Facility: ____/____/____

Hours of Operation	Sun Hours	Mon Hours	Tues Hours	Wed Hours	Thurs Hours	Fri Hours	Sat Hours
Specify the time facility opens & closes for each day	Open - close	Open - close	Open - close	Open - close	Open - close	Open - close	Open - close

YOUR SIGNATURE BELOW WILL ACKNOWLEDGE THAT YOU HAVE RECEIVED A COPY OF THE CODE OR INFORMATION AS TO WHERE TO OBTAIN A COPY AND WILL COMPLY WITH ALL APPLICABLE WISCONSIN ADMINISTRATIVE CODE(S).

_____ _____ _____
SIGNATURE OF LICENSEE OR AGENT **TITLE** **TODAY'S DATE**

Within 30 days after receiving a complete application for a permit, the department or its agent shall either approve the application and issue a permit or deny the application. If the application for a permit is denied, the department or its agent shall give the applicant reasons, in writing, for the denial. A permit shall not be issued to an operator without prior inspection. Permit will be issued according to: Chapter 254.47 (5) and 254.64 (1) (c), Stats., Chapter 254.47 (1), Stats., Chapter 254.64 (1) (a), Stats., Chapter 254.47 (4) and Chapter 254.64 (5), Stats.