



Adams County Health Department

Public Health
Prevent. Promote. Protect.

Environmental Health and
Emergency Preparedness

923 Sunrise Avenue
West Union, Ohio 45693
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Fax: (937) 544-3035
jwork@adamscountyhealth.org

APPLICATION TO OPERATE A TATTOO and/or BODY PIERCING ESTABLISHMENT

INSTRUCTIONS

- 1) Complete the applicable sections.
- 2) Sign and date the application.
- 3) Make check or money order payable to: **Adams County Health Department**
- 4) Return payment and signed application by January 1st to avoid a 25% late fee.

TYPE OF OPERATION

Tattoo \$300.00 () Body Piercing \$300.00 () Tattoo and Body Piercing \$400.00 ()

BUSINESS INFORMATION

Name of Operation: _____

Address of Operation: _____

Phone Number: _____ Fax: _____

Days and Hours of Operation: _____

OPERATOR INFORMATION

Name of Operator: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

I hereby certify that I am the owner, or authorized representative of the above operation and intend to comply with all requirements established by Ohio Revised Code section 3730 and Ohio Administrative Code section 3701-9.

Signed: _____ **Date:** _____

*****FOR OFFICE USE ONLY*****

Date Paid: _____ Receipt #: _____ Date Issued: _____

License #: _____ Approved By: _____

Together We Care!