



Public Health Department

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Environmental Health Division

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BODY ART FACILITY PERMIT APPLICATION

NEW

RENEWAL

FEES: SINGLE PRACTITIONER: \$249 2-4 PRACTITIONERS: \$374 5+ PRACTITIONERS: \$500

California Health and Safety Code, Chapter 7, Section 119300, requires all body art facilities to maintain a valid health permit.

Facility Name _____ Phone _____

Owner(s) Name(s) _____

Facility Address _____ Suite _____

City _____ State _____ Zip _____ Email _____

Mailing Address (if different than above)

Street/P.O. Box _____ Suite _____

City _____ State _____ Zip _____ Phone _____

Services provided in this facility (check all that apply):

- Tattoo
- Body Piercing
- Permanent Cosmetics
- Branding
- Temporary Event

List all practitioners who operate in your facility. (Use back of form for more space, if necessary)

*Practitioner Name (use back/additional page if needed)	Mailing Address

*Each practitioner must complete a Practitioner Registration Form and submit required documents to this office.

As a condition for a health permit, the applicant shall provide the following (as needed):

1. A copy of the facility's Infection Prevention Control Plan as required by the California Health and Safety Code, Section 119313.
2. Plans must be submitted for new construction or remodel of the facility prior to construction

I declare, that to the best of my knowledge, the information I have provided is true and accurate. I agree to conform to all conditions, orders, and directions issued pursuant to the California Health and Safety Code, and all applicable County and City Ordinances. I hereby consent to inspections of this facility by Butte County Environmental Health and will notify the office within 30 days of any changes in the above information.

Owner Signature

Print Name

Date

For Official Use Only

FA # _____ PR# _____ Issue Permit Date _____ Approved By _____

[] Cash [] Check # _____ [] Credit Card Transaction # _____ Receipt # _____ Amount Received _____

Date Received _____ Received By _____ Comments _____