

SHETLAND ISLANDS COUNCIL

CIVIC GOVERNMENT (SCOTLAND) ACT 1982

APPLICATION FOR THE GRANT/RENEWAL OF A LICENCE TO CARRY OUT THE ACTIVITY OF SKIN PIERCING OR TATTOOING

Please read the accompanying notes before filling in this form. The form should be completed using BLOCK CAPITAL LETTERS. Should you need assistance in completing it, please contact Environmental Health, Old Anderson High School, Lovers Loan, Lerwick, Shetland, ZE1 0BA. Telephone: Lerwick 745250. Fax: Lerwick 744802.

Answer ALL questions			
1	Title	Surname	First Name(s)
(a) Full Name			
(b) Home Address			
(c) Telephone Number. Home: Business: Mobile: Email address:			
(d) Age, Date and Place of Birth	Age	Date of Birth	Place of Birth
(e) Name address and telephone number of person, company or firm employing you to act as a skin piercer or tattooist.			
(f) Are you as the applicant going to carry out the day-to-day management of the business? If no, give full name, address and date of birth of any person so engaged		YES/NO*	

<p>2 (a) Days of the week and the hours during each day when it is proposed to trade</p> <p>(b) Period during which it is proposed to trade, i.e. all year round or specific months, etc.</p>	<table border="0"> <thead> <tr> <th style="text-align: left;">Days of Week</th> <th style="text-align: left;">Hours</th> </tr> </thead> <tbody> <tr> <td>Monday</td> <td>Between &</td> </tr> <tr> <td>Tuesday</td> <td>Between &</td> </tr> <tr> <td>Wednesday</td> <td>Between &</td> </tr> <tr> <td>Thursday</td> <td>Between &</td> </tr> <tr> <td>Friday</td> <td>Between &</td> </tr> <tr> <td>Saturday</td> <td>Between &</td> </tr> <tr> <td>Sunday</td> <td>Between &</td> </tr> </tbody> </table>	Days of Week	Hours	Monday	Between &	Tuesday	Between &	Wednesday	Between &	Thursday	Between &	Friday	Between &	Saturday	Between &	Sunday	Between &
Days of Week	Hours																
Monday	Between &																
Tuesday	Between &																
Wednesday	Between &																
Thursday	Between &																
Friday	Between &																
Saturday	Between &																
Sunday	Between &																
<p>3 (a) Name of Business to be licensed</p> <p>(b) Full address of business</p>																	
<p>4 State nature of service to be offered e.g.</p> <p>Skin piercing: acupuncture, ear piercing, cosmetic body piercing or electrolysis; and/or Tattooing.</p>																	
<p>5 Training Record.</p> <p>Description / Title of Training Course(s) and dates when undertaken:</p> <p>Please include copies of certificate(s)</p>																	

6 Has any party named ever been convicted of ANY crime or offence? (This includes offences relating to skin piercing or tattooing, contraventions of Bye-laws, Road Traffic Offences, Environmental Health/Food Hygiene Regulations and ANY other conviction of any kind). If yes, subject to the provisions of the Rehabilitation of Offenders Act 1974, give particulars below. **If no, please write none below.**

Date	Court	Offence	Sentence

<p>7 (a) Has any party named above previously held or does he currently hold a licence to carry on the activity of skin piercing or tattooing?</p> <p>If yes, when was the licence granted, when did/does it expire, which Authority granted it, and what was the Licence Number?</p>	<p>YES/NO*</p>
<p>(b) Has any party named ever been refused a licence to carry on the activity of skin piercing or tattooing or had their licence suspended or revoked?</p> <p>If yes, when and which Authority refused, suspended or revoked the Licence?</p>	<p>YES/NO*</p>
<p>8 Specify the third party / public liability insurance in force for the activity (including treatment risk) giving details of the insurance company and the amount of cover. Include a copy of the current insurance schedule with the application.</p>	

9 Site Notice Declaration

* (A) I/We declare that I/we shall, for a period of 21 days commencing with the date on which the application was received by the Council, display at or near the premises so that it can conveniently be read by the public, a Site Notice complying with the requirements of Paragraph 2(3) of Schedule 1 to the Civic Government (Scotland) Act 1982.

OR

* (B) I/We declare that I am/we are unable to display a Site Notice of this application at or near the premises because I/we have no rights of access or other rights enabling me/us to do so, but that I/we have taken the following steps to acquire the necessary rights, namely:-

but have been unable to acquire those rights.

Delete (A) or (B) as appropriate.

Where declaration (A) is made there must be produced as soon as possible after the 21 day period a Certificate of Compliance with Site Notice in accordance with Paragraph 2(2) of Schedule 1 to the Civic Government (Scotland) Act 1982.

I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I hereby make application to the Council for the granting/renewal * of a licence to carry on a business which provides skin piercing or tattooing. I have received and read the general conditions relating to the licensing of skin piercing and tattooing. I enclose the appropriate application fee.

Signature Date
(Signature of Applicant or Agent)

Print Name

On behalf of
(Complete where you are applying on behalf of a Company or Partnership)

Position
(Position of applicant in Company or Partnership if not otherwise stated)

Note:

Any person who in or in connection with the making of this application makes any statement which he knows to be false or recklessly makes any statement which is false in a material particular shall be guilty of an offence and liable, on summary conviction, to a fine not exceeding £2,500.

Data Protection:

The information you have provided will be used by Shetland Islands Council to process your application and to maintain the register in terms of The Civic Government (Scotland) Act 1982 ("the Act"). The Council may share your information with third parties in order to check its accuracy, prevent and detect fraud or protect public funds. We may also share the information provided and other relevant information we hold about you between Council departments and others where this is necessary or expedient for the purposes of the Act or as otherwise required by law. You can request access to any personal information held about you by the Council by writing to the Head of Governance and Law, Legal Department, 8 North Ness Business Park, Lerwick, Shetland.

Submission:

This form is to be lodged with the Environmental Health Department, Infrastructure Services Department, Old Anderson High School, Lovers Loan, Lerwick, Shetland, ZE1 0BA, together with the appropriate application fee, training record and current public liability insurance schedule. Please note the fee is an application fee; it will not be refunded in the event of the licence application being either withdrawn or refused.

* Delete as appropriate