

## Skin piercing application - PREMISES

Please read before submitting your application:

1. **Registration only applies to the following practices:** acupuncture; electrolysis; ear and nose piercing; cosmetic body piercing; tattooing; semi-permanent make up and temporary tattooing; microblading. Any other skin piercing practices do not currently require registration.
2. **Before any skin piercing takes place, both the premises and all practitioners require registration.**
3. Applicants should familiarise themselves with the local byelaws and [Kent Code of Practice for Hygienic Skin Piercing](#).
4. Please note that **fees are not refundable**.
5. Registration is a one off process.
6. If you wish to add an additional procedure after the initial registration, a new application must be completed. Except if you wish to add a procedure that is in the same or lower category (e.g. a category c premises would like to carry out a procedure in category A or B). In this case request and amendment to the registration certificate.
7. The registration is not transferable if the business moves to a new premises or the ownership changes, a new application will need to be made.

## When your application has been received

- A member of the Environmental Health team will contact you and make an appointment to carry out a registration visit.
- The inspector will check compliance with the Byelaws and Kent Code of Practice for Hygienic Skin Piercing as well as ensuring that general health and safety requirements are being met.
- You may be asked to make some changes to your premises or operating procedures. This information will be provided to you during the inspection and later in writing.
- Once registered a certificate will be sent to you. Your premises may be revisited to ensure compliance with legislation and associated guidance. Visits may also be carried out if a complaint is received, or if you have asked for advice or wish to make an amendment to your registered details.

## Other things to consider

- Employee and public liability insurance
- Hepatitis B vaccination (if applicable)
- First aid training
- Comprehensive client records and consultation
- Written aftercare advice to be provided to the client
- Your duties under the Health and Safety at Work etc. Act 1974.

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**DATA PROTECTION** - We will collect the information you have provided to administer your skin piercing registration. Our **lawful bases** for processing your personal information are:

- our legal obligation(s) under the Local Government (Miscellaneous Provisions) Act 1982 (as amended)
- necessary for the performance of a task in the public interest or in the exercise of official authority vested in us under the above legislation

**Reasons for processing** - some of the information that is collected and shared is classified as:

- special category personal data
- criminal convictions and offences (including alleged offences).

This is processed for reasons of substantial public interest under the laws that apply to us (see above) where this helps to meet our broader social obligations such as where it is necessary for us to fulfil our legal obligations and regulatory requirements. Please view our Privacy Notice [www.sevenoaks.gov.uk/privacy](http://www.sevenoaks.gov.uk/privacy) for further details of how we process your personal information.

## Application for Skin Piercing Registration - PREMISES

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (as amended)

**PLEASE ENSURE ALL SECTIONS ARE COMPLETED**

### SECTION A

At the address listed in Section B, I wish to apply for the following registration(s):

(Tick all that apply)

Category A

- Ear piercing with hygienic piercing instrument
- Nose piercing with hygienic piercing instrument

Category B

- Acupuncture
- Electrolysis

Category C

- Cosmetic body piercing
- Tattooing
- Semi permanent make up / micropigmentation / temporary tattooing
- Semi permanent make up – microblading

Are you adding an additional practice to an existing registration?      YES / NO

### SECTION B - Premises to be registered

Trading (practice) Name.....

Address .....

Contact number(s) .....

Email .....

Person(s) responsible for management of premises .....

Registered / Head Office address (if applicable): .....

	<b>SECTION C – Premises</b>		<b>Comments</b>
	<b>If you answer ‘No’ to any of the questions, speak to the Environmental Health Team to ensure compliance with the Bylaws before applying</b>		
1.	Number of treatment rooms used for skin piercing procedures		
2.	Is there a wash hand basin in each treatment room?	YES/NO	
3.	Is the wash hand basin(s) for the sole use of the practitioner?	YES/NO	
4.	Does the basin(s) have a constant supply of hot and cold running water?	YES/NO	Ideally there should be a single mixer tap which is non-hand operated
5.	Is there hand soap at the wash hand basin (s)?	YES/NO	Ideally soap must be dispensed from a no touch dispenser
6.	Are there disposable paper towels at the wash hand basin stored in a suitable dispenser which prevents cross contamination eg wall mounted dispenser?	YES/NO	
7.	Is there a separate sink for washing equipment?	YES/NO/n/a	
8.	Are the wall surfaces in the treatment room(s) smooth and washable?	YES/NO	Acceptable wall coverings - painted plaster, wall tile which are properly grouted, smooth wall cladding/Perspex (properly installed) <b>Unacceptable wall coverings – wallpaper, bare wood, tongue and groove cladding</b>
9.	Is the floor in the treatment room(s) smooth and washable?	YES/NO	This is a requirement were tattooing, semi-permanent make up and cosmetic piercing is taking place

10.	Does the treatment couch/chair have a smooth washable surface?	YES/NO	
11.	Do you have a sharps box?	YES/NO	
12.	Do you have a clinical waste contract in place?  If YES, please specify name of clinical waste contractor	YES/NO	
13.	What cleaning products are used?	Surfaces:  Equipment:	For further information on cleaning see page 44 of the Kent Code of Practice and page 49 Tattooing and Piercing toolkit

#### SECTION D Declaration

**I declare that the information given is true to the best of my knowledge and belief AND I have read and understood the Kent Code of Practice for Hygienic Skin Piercing**

The following documents are enclosed/mailed to [environmental.health@sevenoaks.gov.uk](mailto:environmental.health@sevenoaks.gov.uk).

- Clinical waste contract
- Photograph of the wash hand basin and disposable paper towel dispenser
- Photograph of the walls and floor of the treatment room

#### Payment method

**Credit/debit card** - call 01732 227000, Monday to Thursday 8.45am to 5pm, Fridays 8.45am to 4.45pm.

Name ..... Date .....

#### All applications should be sent to:

Environmental Health Team  
 Sevenoaks District Council  
 Argyle Road  
 Sevenoaks  
 Kent TN13 1HG

Or emailed to [environmental.health@sevenoaks.gov.uk](mailto:environmental.health@sevenoaks.gov.uk).