

Oklahoma State Department of Health / Consumer Health Service Mail: PO Box 268815, Oklahoma City, OK 73126-8815 Physical: 123 Robert S. Kerr Ave., Oklahoma City, OK 73102 Telephone: (405) 426-8250 / Fax: (405) 900-7557

E-mail: CHSLicensing@health.ok.gov

Body Art Program Website: http://chs.health.ok.gov/

BODY ART TEMPORARY ESTABLISHMENT (EVENT) APPLICATION

	Instructions: Complete this application by using the checklist to ensure all required documentation is attached and mail to the PO Box shown at the top of this form.						
Application & Documentation Checklist (ref. OAC 310:233-9-1(d)) Completed and signed Body Art Temporary Establishment (Event) Application with License Fee (\$500 Tattooing, \$250 Body Piercing, \$750 for both) Event Floor Plan (ref. OAC 310:233-7-1,2) Include details about Hazardous Waste Plan, Work Station Square Footage, Hand Wash Stations, & Barriers, etc. List of Participating Artists (complete back of this form) Copy of Client Consent Form Copy of Client After-Care Instructions Complete event applications including fees MUST ARRIVE IN OUR OFFICE a minimum of 30 days prior to event; allow additional time for mail.							
APPLICANT INFORMA	ATION						
Applicant Name:							
Business Name: (Leave blank if not applicable)	Last	First	Middle				
Mailing Address:							
	Street	Address					
	City	State	Zip				
Phone:	E-mail:						
EVENT INFORMATION							
Main Purpose:	■ Industry Trade Show	cational Celebration in which body art is	the primary function				
ividiii i di pose.	Industry Trade Show Troduct behichstration Educational Celebration in which body art is the primary function						
Equipment Type:	Reusable (Attach Sterilization Plan) Disposable Ds	oth (Attach Sterilization Plan)					
Equipment Type: Event Name:	Reusable (Attach Sterilization Plan) Disposable Ds	oth (Attach Sterilization Plan) Number of Artist Booth	s:				
	Reusable (Attach Sterilization Plan) Disposable Ds		S:				
Event Name:			s:				
Event Name:		Number of Artist Booth	s:				
Event Name: Physical Address:	Stree	Number of Artist Booth t Address State	Zip				
Event Name:	Stree	Number of Artist Booth					
Event Name: Physical Address:	Stree City	Number of Artist Booth t Address State					
Event Name: Physical Address: Sponsoring Shop*: Dates**: *Applicant shall be affiliated with	Stree City	Number of Artist Booth t Address State Lic. #: Date	Zip				
Event Name: Physical Address: Sponsoring Shop*: Dates**: *Applicant shall be affiliated with ** Maximum of 3 days per event. Re	City Start Date End a tattooing and/or body piercing establishment that has a current Oklahoma license.	Number of Artist Booth t Address State Lic. #: Date	Zip				
Event Name: Physical Address: Sponsoring Shop*: Dates**: *Applicant shall be affiliated with	City Start Date End a tattooing and/or body piercing establishment that has a current Oklahoma license. egulations require that complete applications reach our office 30+ days prior to start date. Ple	Number of Artist Booth t Address State Lic. #: Date	Zip				
Event Name: Physical Address: Sponsoring Shop*: Dates**: *Applicant shall be affiliated with ** Maximum of 3 days per event. Re EVENT TYPE & FEE Select event type: READ CAREFULLY The app personally signed this appli	Start Date Start Date End a tattooing and/or body piercing establishment that has a current Oklahoma license. egulations require that complete applications reach our office 30+ days prior to start date. Ple Tattooing (\$500.00) Body Piercing (\$250.00) Tollicant signing this application being duly sworn declares that the foregulication. The applicant also accepts and understands all conditions of light and are quired records. Submitting this form DOES NOT give period.	Number of Artist Booth t Address State LiC. #: Date ase mail your application well in advance to ensure your event attooing and Body Piercing (\$750.00) toing statements are true to the best of their kricensure as set forth in OAC 310:233 including references.	Zip Tanay be eligible for licensure. Thowledge and that they rules pertaining to scope				
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ARTIST INFORMATION (Must be legibly printed.)

E: Out-of-state artist complete applications including fees MUST ARRIVE IN OUR OFFICE 15 days prior to event; Oklahoma Artists must have current license.								
<u>Legal Name</u>	State of Practice	OK Licensed?	License #	Artist Type	0			

	<u>Legal Name</u>	State of Practice	OK Licensed?	License #	Artist Type	Office
1					☐ Tattooing ☐ Body Piercing	
2					☐ Tattooing ☐ Body Piercing	
3					☐ Tattooing☐ Body Piercing	
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Please copy and attach additional pages as needed.