Application for registration of PREMISES
in connection with the practice of acupuncture or the
business of tattooing, semi-permanent skin colouring, cosmetic piercing, or electrolysis.

1. Applicants Details
Name: ………………………………………………………………………………………………………………………………………
Address: ………………………………………………………………………………………………………………………………………

Email Address: ………………………………………………………………………………………………………………………….
Postcode: …………………………………………………..  Telephone No:…………………………………………………………..

2. Details of Premises to be Registered
Name of Premises: ……………………………………………………………………………………………………………………….
Address: ……………………………………………………………………………………………………………………………………

Email Address: ………………………………………………………………………………………………………………………….
Postcode: …………………………………………………….. Telephone No: ………………………………………………………

3. Activities for which the applicant wishes to be Registered
Please tick those activities for which you wish the premises to be registered
☐ Acupuncture  ☐ Tattooing  ☐ Semi-permanent Skin Colouring  ☐ Cosmetic Piercing  ☐ Electrolysis

4. Additional Registrations
Do you hold a registration granted under the above Acts in relation to yourself or a premises in any area
other than to which this application relates and the details of that registration?      YES / NO*
If ‘yes’ please state: ……………………………………………………………………………………………………………………….
Name of Premises:……………………………………………………………………………………………………………………….
Address: …………………………………………………………………………………………………………………………………..

Email Address: ………………………………………………………………………………………………………………………….
Postcode: ……………………………………………………… Telephone No: …………………………………………………

5. Declaration
I hereby apply for registration for the purpose in 3 above.
I enclose the appropriate fee for this application (please refer to the list of current fees and charges).
Note: It is illegal to undertake piercing activities until the Registration is completed.

Signed……………………………………………………………Date………………………………………………..
Address: …………………………………………………………………………………………………………………………………..

The completed form with the appropriate fee (see scale of charges on our website) should be returned to the
address detailed below. Cash or cheques made payable to Hastings Borough Council and accompanied by a
valid cheque card will be taken at the public counter. Credit or Debit cards are also accepted. You should note
that credit card transactions may be subject to a surcharge.

Food, Health & Safety Team, Environmental Health, Aquila House, Breeds Place, Hastings
East Sussex TN34 3UY
Tel 01424 451078  Fax 01424 451133  Email: foodsafety@hastings.gov.uk
www.hastings.gov.uk/environment_planning/health_safety_hygiene/
Receipt No: …………………………………