



## APPLICATION FORM FOR APPEAL

<b>NAME OF BUSINESS</b>	
<b>ADDRESS OF THE PREMISES</b>	
<b>CONTACT NAME</b>	
<b>TEL No. / MOBILE No.</b>	
<b>PLEASE STATE THE GROUNDS UPON WHICH YOUR APPEAL IS FOUNDED</b>  (THE GROUNDS FOR APPEAL CAN BE FOUND IN THE RULES OF THE SCHEME)  <i>Please use additional sheets if required.</i>	

Please return the completed form to the address at the bottom of the application.

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(On behalf of all tattooists within the premises)

Environmental Health Team,  
Muriel Matters House, Breeds Place  
Hastings, East Sussex,  
TN34 3UY  
[healthandsafety@hastings.gov.uk](mailto:healthandsafety@hastings.gov.uk)