



**Local Government (Miscellaneous Provisions) Act 1982 – as amended  
Application for Registration for the Business of Tattooing**

**1. Name and address of practice or business where tattooing will be done:**

  
  
  
  
  

**Telephone :**

**2. Name and address of applicant:**

  
  
  
  
  

**Telephone:**  
(Give registered office if a limited company, business address if a partnership or home address if an individual)

**3. Names of any professional bodies of which you are a member:**

  
  
  
  
  

If none state "none"

**Declaration:**  
I/We hereby apply to be registered for the business of tattooing and for the premises mentioned in part 1 above to be registered for the carrying on of the business of tattooing.

- I enclose the appropriate registration fee (cheques to be made payable to "Leeds City Council")  
**OR** I/We confirm that I/we have paid the registration fee by telephone payment (delete as appropriate)

**Signature(s) of applicant(s) ..... Date .....**

**Name(s) (print) .....**

**Please complete all parts of the form and return to :**  
**Health and Safety Service, Health and Environmental Action Service, Millshaw Park Way,**  
**Leeds LS11 OLS**

Telephone Banking Reference: TAT /20