

Body Art Time-Limited Event Application

The following application must be completed in its entirety, along with the appropriate fee and all <u>required</u> <u>documentation</u>, <u>within 10 days of the planned event</u>. Once submitted for review, the application fee is non-refundable.

License Type:				
☐ Tattooing Only	\$80.00			
☐ Body Piercing Only	\$80.00			
☐ Combination Tattooing and Body Piercing	\$120.00			
	*			
Event Information:				
emporary Event Name:				
emporary Location: Permanent Structure	□ Mobile Unit □ Other (describe):			
emporary Event Address, City, Zip:				
Event Start Date:	Event End Date:			
	Date/ Time of Setup for Event:			
License Holder Information:				
Name of Business that will appear on license:				
Name of Business that will appear on license:Phone:Phone:				
delinede ewiter, recoponisible raity.	1 Hone:			
Mailing Address, City/ State, Zip:				
Mailing Address, City/ State, Zip:				
Mailing Address, City/ State, Zip:				
Mailing Address, City/ State, Zip:				
Mailing Address, City/ State, Zip: Business Email:	DOCUMENTED TRAINING			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING □ Tattoo □ Piercing			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing First Aid Bloodborne Pathogens			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing Tattoo Piercing			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing First Aid Bloodborne Pathogens			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing First Aid Bloodborne Pathogens First Aid Bloodborne Pathogens			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing Tattoo Piercing Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens			
Mailing Address, City/ State, Zip:	DOCUMENTED TRAINING Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing Tattoo Piercing Tattoo Piercing First Aid Bloodborne Pathogens Tattoo Piercing			

☐ Single Use ☐ Reusable



Provide wri	itten deta	ails for the following	j :		
What type of	gloves w	ill be used?	☐ Nitrile	□ Latex	
Type of surface	ce disinfe	ectant products:			
71	'				
Equipment					
Yes	N/A				
		Hand Sinks will be	convenient to procedure	areas	
				ient level in procedure areas	
				us, smooth, cleanable materi	als
	_ followin		e available to patrons and	l body artists	
I will have the		g equipment: Sharps container			
П		Trash can(s) with o	cover		
П		Gloves	50 ()		
		Sterilization/ sanita	ation products		
			ash with single use cups		
		Skin prep and afte	r procedure products		
Please explai	in any an	swers of "N/A":			
Documents	s- I will ha	ave a paper or digital	copy of all documents list	ted below available at the ev	ent
Yes	N/A				
		Aftercare instruction			
		Consent forms for			
		Mill certificates for	persons under age 18 jewelry		
	all requi	irements establishe		ntative of the above operate Ohio Revised Code and s	
Signature:				Date:	· · · · · · · · · · · · · · · · · · ·
Submit comp	leted forr	ทร and required docเ	ımentation in one of two v	vays:	
		<u>andCountyEH@gmail</u> ne Ashland County H		Claremont Ave., Ashland, OH	44805)
OFFICE USE	ONLY:				
Date plans re	ceived: _				
☐ Applicatio	n approv	ed for license			
Sanitarian:				Date:	



R	equired Documentation:						
	Completed application						
	opy of current body art facility license if licensed by a health district outside of Ashland County						
	ans and specifications that are drawn legibly and reasonably to scale that include:						
	✓ General layout of the entrances/exits and body art equipment (i.e. procedure chair, artist chair, lamp, trays, etc.).						
	✓ Dimensions of areas to be utilized (minimum of 36 ft² per artist required)						
	✓ Lighting plan						
	✓ Location and types of plumbing fixtures (i.e. hand sinks, restrooms)						
	✓ If sterilizing on-site, include drawing of sterilization area (i.e. location of sink(s), autoclaves).						
	Records of training for all body artists that will work at the event, to include:						
	✓ Documentation of training in the body art. (i.e., relevant work history, certifications, courses, seminars,						
	apprenticeships or other training.)						
	✓ Documentation of current completion of course in first aid						
	✓ Documentation of current completion of course in blood borne pathogens						
	Client consent form						
	Minor consent form (if applicable)						
	Aftercare instructions						
	Mill certificates for jewelry						
	Written Infection Control Plan that includes at least the following elements: ✓ Procedures for decontaminating and disinfecting environmental surfaces ✓ Procedures for decontaminating, packaging, sterilizing, and storing reusable equipment and						
	instruments						
	 ✓ Procedures for protecting clean or sterile instruments from contamination during storage ✓ Procedures for ensuring that standard precautions and aseptic techniques are utilized during all body art procedures 						
	✓ Procedures for the safe handling and disposal of needles						
	Application fee						
	• •						



General Guidance/ Information (please retain for your records)

Please review the following information from the Ohio Department of Health Website:

- ✓ Body Art (Tattoo & Body Piercing)
- ✓ Ohio Administrative Code (OAC) 3701-09: Tattoo and Body Piercing Services
- ✓ Ohio Revised Code (ORC): 3730 Tattooing or Body Piercing Services

Overall Safety and Sanitation:

- ✓ Facility must be a minimum of 100 sq ft; Individual work areas minimum of 36 sq ft
- ✓ Must have handwashing sink(s) conveniently located to procedure area (cannot be in a separate room)
- ✓ All waste receptacles must have a lid
- ✓ Lighting requirements: 40 foot-candles at client level required in procedure areas, spot lighting acceptable. 20 foot-candles at 30" above floor throughout the rest of the facility
- ✓ Tables and equipment must be constructed of easily cleanable material with smooth finish
- ✓ Equipment and supplies for body art cannot be stored in the restroom
- ✓ Only sterilized single use disposable needles shall be used.
- ✓ Only single use disposable razors shall be used.
- ✓ All marking instruments must be single use
- ✓ All products used to address the flow of blood or to absorb blood must be single use and disposed of properly. No styptic pencils, alum blocks or other solid styptics may be used.
- ✓ Body art must be performed on only normal healthy skin
- ✓ No body art procedure shall be performed on an individual under 18yr without parental consent.
 - Parent, guardian, or custodian of minor must be present at time of procedure
 - No body art procedure may be performed on the nipple, areola, or genital area of a minor regardless of consent.
- ✓ No animals of any kind in facility except service dogs.
- ✓ No grooming, smoking, vaporizing, or food & drink unless medically necessary in procedure or sterilization area
- Clean unused nitrile gloves worn throughout entire procedure, set up, and tear down
- ✓ After any body art procedure and prior to next, all procedure areas shall be cleaned and disinfected
- ✓ Each patron must be provided verbal and written aftercare instructions that include information about physical restrictions, wound care, signs and symptoms of infection, and when to seek medical care.

Client records must contain the following information, and must be kept for two years after the procedure:

- ✓ Patron's name and address
- ✓ Date of service
- ✓ Color and manufacturer of all inks, dyes, or pigments
- ✓ Jewelry used, including size, material composition, and manufacturer for each piercing performed
- ✓ Location of procedure

Additional requirements for tattooing:

- ✓ Prior to procedure, the area of patron's body must be thoroughly cleaned with soap and water and then prepared with an approved antiseptic solution
- ✓ Stencils must be single use, and only commercially manufactured inks, dyes, or pigments may be used
- ✓ Only single use containers of ink, dyes and pigments may be used for each patron and discarded after each use.
- ✓ The completed tattoo must be washed with an approved antiseptic solution, allowed to air dry, and a sterile, nonocclusive(breathable), single use dressing must be applied

Additional requirements for piercing:

- Prior to procedure, the area of patron's body must be thoroughly cleaned with soap and water and then prepared with an approved antiseptic solution
- ✓ For oral piercings the patron must be provided alcohol-free antiseptic mouthwash in single use cup
- √ For lip or cheek piercing, both skin preparation and oral procedures must be followed.
 - Only sterilized jewelry made of ASTM F136 Titanium, ASTM F138 Steel, Solid 14K or 18K gold, Niobium, or Platinum shall be placed in new piercings
 - Mill certificates for jewelry must be maintained at facility