

## **SKIN PIERCING APPLICATION FOR REGISTRATION**

### **NOTES TO THE APPLICANT** – please read before submitting an application

1. **Registration only applies to the following practices:** acupuncture; electrolysis; ear and nose piercing; cosmetic body piercing; tattooing; semi-permanent make up and temporary tattooing; microblading. Any other skin piercing practices not listed here do not currently require registration.
2. **Before any skin piercing takes place**, each person(s) must be registered at the address at which they are practicing, as stated in Section B. This is not transferable to other premises or local authorities.
3. Registration is not necessary where the person practicing is a registered medical practitioner or where there is a medical doctor operating in the same premises, **and** the practitioner is under the **direct supervision of that doctor**.
4. Please ensure that all **information provided** is correct to the best of your knowledge. If full information is not provided or you or your premises are not ready for inspection, it may take longer to process your application, or your application may be rejected.
5. Please note that **fees are not refundable**.
6. Applicants should familiarise themselves with the local byelaws and Kent Code of Practice for Hygienic Skin Piercing <https://www.dartford.gov.uk/by-category/environment-and-planning2/Environmental-Health-Homepage/skin-piercing/skin-piercing-registration>
7. Registration is a one off process. Once registered, if any of the **registered details change**, a new application must be submitted, accompanied with the correct fee. For example:
  - (a) If you wish to carry out another piercing procedure for which you are not already registered;
  - (b) To register additional practitioners to operate from an existing registered premises;
  - (c) The registration is not transferable if you or the business moves to a new premises – you will need to complete a new application.
8. You must be registered even if you plan to occasionally undertake **home visits**. You must still be able to meet the requirements of the byelaws and associated codes of practice as far as reasonably practicable without compromising hygienic piercing guidelines. For some types of skin piercing, you may not be able to comply with the expected standards for hygienic skin piercing as a mobile practitioner.

## WHEN YOUR APPLICATION HAS BEEN RECEIVED

- An email will be sent requesting the appropriate fee and copies of training certificates/ evidence that you are competent to carry out the procedure
- A member of the Environmental Health team will contact you and make an appointment to carry out a registration visit.
- The inspector will check compliance with the Byelaws and Kent Code of Practice for Hygienic Skin Piercing as well as ensuring that general health and safety requirements are being met.
- During the visit, the layout of the premises will be inspected and you will be expected to answer questions about your procedures relating to hygiene, waste, customer care, record keeping etc. This may also include asking individual operators to explain their procedures.
- You may be asked to make some changes to your premises or operating procedures. This information will be provided to you during the inspection and later in writing.
- Once registered a certificate will be sent to you. Your premises may be revisited to ensure compliance with legislation and associated guidance. Visits may also be carried out if a complaint is received, or if you have asked for advice or wish to make an amendment to your registered details.

## OTHER THINGS TO CONSIDER

- Employee and public liability insurance
- Hepatitis B vaccination (if applicable)
- First aid training
- Comprehensive client records and consultation
- Written aftercare advice to be provided to the client
- Your duties under the Health and Safety at Work etc Act 1974.

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**DATA PROTECTION ACT 2018** - We will collect the information you have provided to administer your skin piercing registration.

Our **lawful bases** for processing your personal information are:

- our legal obligation(s) under the Local Government (Miscellaneous Provisions) Act 1982 (as amended)
- necessary for the performance of a task in the public interest or in the exercise of official authority vested in us under the above legislation

**Reasons for processing** - some of the information that is collected and shared is classified as:

- special category personal data;
- criminal convictions and offences (including alleged offences).

*This is processed for reasons of substantial public interest under the laws that apply to us (see above) where this helps to meet our broader social obligations such as where it is necessary for us to fulfil our legal obligations and regulatory requirements. We have a Data Protection Policy that sets out how this information will be handled.*

Dartford Borough Council, Civic Centre, Home Gardens, Dartford, Kent DA1 1DR is the Data Controller  
[dataprotection@dartford.gov.uk](mailto:dataprotection@dartford.gov.uk)

Data Protection: For further details of how we process your personal information and for details on your additional rights, please refer to our [Corporate Privacy Notice](#) and our Privacy Notice for Environmental Health at <https://www.dartford.gov.uk/privacy-notice/environmental-health>

**SKIN PIERCING APPLICATION FOR REGISTRATION**

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (as amended)

**PLEASE ENSURE ALL SECTIONS ARE COMPLETED**

**SECTION A**

At the address listed in Section B, I wish to apply for registration for:

- Electrolysis
- Acupuncture
- Cosmetic body piercing
- Tattooing
- Semi permanent make up / micropigmentation / temporary tattooing
- Semi permanent make up – microblading

Is this the initial registration for the treatment specified?      **Yes**      **No**  
Are you adding practitioners to an existing registration?      **Yes**      **No**

The initial registration fee covers the registration of a premises for a particular 'type of piercing' and includes the registration of one practitioner.

\*If you are applying for more than one type of piercing, you will need to pay the appropriate fee for both.

**SECTION B Premises to be registered**

Trading (practice) address .....

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Contact Number(s) .....

Email .....

Person(s) responsible for management of premises .....

Registered / Head Office address (if applicable): .....

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**SECTION C Operator Details** *(each practitioner must complete application for registration)*

Full name of applicant.....

Home address of applicant .....

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Telephone number .....

Email.....

Have you previously been registered/licensed with another local authority? **Yes** **No**

If YES please provide details: .....

.....

Qualifications / training (please specify): .....

.....

.....

Please tick who provided your training:

College

Professional training organisation

Apprenticeship

Other:

If other, please state: .....

Membership of professional body (if applicable):.....

.....

Have you had any convictions under the above Acts in last five years? **Yes** **No**

	<b>SECTION D Premises and Equipment</b>	<b>If you answer 'No' to any of the questions, <u>do not</u> apply until the issues have been addressed</b>	<b>Comments</b>
1.	Number of treatment rooms used for skin piercing procedures		
2.	Is there a wash hand basin in each treatment room?	<b>Yes      No</b>	
3.	Is the wash hand basin(s) for the sole use of the practitioner?	<b>Yes      No</b>	
4.	Does the basin(s) have a constant supply of hot and cold running water?	<b>Yes      No</b>	Ideally there should be a single mixer tap which is non-hand operated
5.	Is there hand soap at the wash hand basin (s)?	<b>Yes      No</b>	Ideally soap must be dispensed from a no touch dispenser
6.	Are there disposable paper towels at the wash hand basin stored in a wall mounted dispenser?	<b>Yes      No</b>	
7.	Are the wall surfaces in the treatment room(s) smooth and washable?	<b>Yes      No</b>	Acceptable wall coverings - painted plaster, wall tile which are properly grouted, smooth wall cladding/Perspex (properly installed) <b>Unacceptable wall coverings – wallpaper, bare wood, tongue and groove cladding</b>
8.	Is the floor in the treatment room(s) smooth and washable?	<b>Yes      No</b>	Practitioners carrying out acupuncture and electrolysis do not need to comply with this requirement, although we would expect any carpets to be steamed cleaned once a year
9.	Does the treatment couch/chair have a smooth washable surface?	<b>Yes      No</b>	
10.	Do you cover the couch/chair with disposable couch roll or similar?	<b>Yes      No</b>	
	Is this changed between clients?	<b>Yes      No</b>	

11.	Are pre-sterilized needles/piercing equipment used?	<b>Yes</b> <b>No</b>	
12.	Do you have a sharps box?	<b>Yes</b> <b>No</b>	
13.	Do you have a clinical waste contract in place?  If YES, please specify name of clinical waste contractor	<b>Yes</b> <b>No</b>	
14.	What cleaning products are used?	Surfaces:  Equipment:	For further information on cleaning see page 44 of the Kent Code of Practice and page 49 Tattooing and Piercing toolkit
15.	What personal protective clothing is used?		e.g gloves (vinyl/nitrile are recommended), apron, mask
16.	Is the skin is cleaned before treatment?  If yes, what is used to clean the skin?	<b>Yes</b> <b>No</b>	
17.	Are skin markers used?  If YES, please specify details	<b>Yes</b> <b>No</b>	These should be single use and disposable.
18.	Is a medical questionnaire and formal written consent completed?	<b>Yes</b> <b>No</b>	The client must be advised of the risks associated with the procedure for informed consent to be given
19.	Make and model of sterilisation equipment, if applicable (ultrasonic /autoclave)		

**SECTION E Declaration**

**I declare that the information given is true to the best of my knowledge and belief AND I have read and understood the Kent Code of Practice for Hygienic Skin Piercing:  
I have completed the form on behalf of the applicant**

Person completing application (applicant/other)

Date .....

Save this form and attach it to an email.

**PLEASE NOTE:** When you save the form use the following steps: Select "**Print**" then select "**Print as PDF**". NOT USING "**Print as PDF**" will result in a blank form being saved, email it to: [eh.admin@dartford.gov.uk](mailto:eh.admin@dartford.gov.uk)