



Billerica Board of Health

Town Hall
365 Boston Road
Billerica, MA 01821
Phone: 978-671-0931 Fax 978-671-0919
Web Site www.town.billerica.ma.us

APPLICATION FOR A BODY ART PRACTITIONER PERMIT

Pursuant to Board of Health Regulations Chapter 3, Section 3.12.003

PLEASE PRINT

____ NEW ____ RENEWAL DATE _____

____ PRACTITIONER (\$200.00 FEE) ____ APPRENTICE (\$150.00 FEE)

NAME OF APPLICANT _____ TELEPHONE _____

ADDRESS OF APPLICANT _____

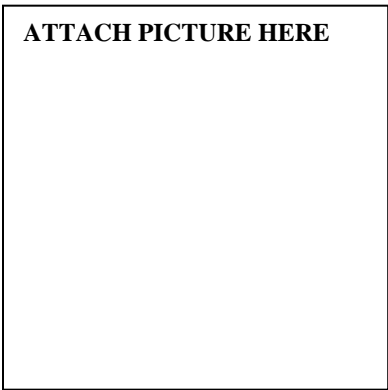
MAILING ADDRESS (IF DIFFERENT) _____

E-MAIL ADDRESS _____

PLACE OF EMPLOYMENT _____

PLEASE PROVIDE THE FOLLOWING DOCUMENTATION WITH THIS APPLICATION.

- 1) IDENTIFICATION TO ESTABLISH PROPER AGE
(MUST BE 18 YEARS OF AGE OR OLDER).
- 2) WRITTEN AGREEMENT TO ADHERE TO ALL BILLERICA
HEALTH REGULATIONS REGARDING BODY ART,
BODY PIERCING OR BODY TATTOOING. (provided on standard form)
- 3) SUBMIT POLICY REGARDING INFECTION CONTROL.
- 4) SUBMIT DOCUMENTATION FOR COMPLETION OF
BASIC TRAINING IN FIRST AID AND CPR.
- 5) SUBMIT DOCUMENTATION FOR COMPLETION OF AN OSHA
COURSE ON PREVENTION OF DISEASE TRANSMISSION AND
BLOOD BORNE PATHOGENS.
- 6) SUBMIT DOCUMENTATION FOR COMPLETION OF A BASIC
ANATOMY AND PHYSIOLOGY COURSE.
- 7) PROVIDE EVIDENCE OF A NEGATIVE TUBERCULOSIS TEST
WITHIN THE PAST TWO (2) YEARS.
- 8) PROVIDE DOCUMENTATION OF HEPATITIS B VIRUS (HBV)
VACCINATION STATUS
- 9) PROVIDE DOCUMENTATION FOR COMPLETION OF A ONE (1) YEAR
APPRENTICESHIP UNDER THE SUPERVISION OF A TRAINED,
EXPERIENCED, PROFESSIONAL BODY ARTIST, BODY PIERCER,
OR BODY TATTOOER.
- 10) SUBMIT ONE (1) FACE FRONT PHOTOGRAPH AT LEAST 2" BY 2" TAKEN
WITHIN THIRTY (30) DAYS PRIOR TO SUBMISSION OF THIS APPLICATION.



INCOMPLETE APPLICATIONS WILL DELAY FURTHER REVIEW AND PROCESSING

Pursuant to Billerica Health Regulations, Chapter 1, Section 1.9.001 this application is subject to a thirty (30) day review and approval period.

LATE RENEWALS WILL BE ASSESSED A LATE FEE IN ACCORDANCE WITH THE MOST CURRENT BOARD OF HEALTH FEE SCHEDULE. LATE FEES ARE EQUAL TO THE ORIGINAL PERMIT FEE. FAILURE TO TAKE APPROPRIATE ACTION TO RENEW PERMITS MAY RESULT IN ADDITIONAL FEES OR FINES TO BE IMPOSED OR OTHER ADMINISTRATIVE ACTION.

Pursuant to Massachusetts General Law Chapter 62C, Section 49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Print Name of Applicant

Signature of Applicant Date

Social Security # / Federal Identification #

