

BOARD OF HEALTH

William J. Lee Memorial Town Hall
1 Lafayette Street, Wakefield, MA 01880
TELEPHONE: (781) 246-6375 | FAX: (781) 224-5018
boardofhealth@wakefield.ma.us



Body Art – Licensed Artist Application
Permit Fee: \$100.00 due by June 30

Name of Establishment: _____ Bus. Phone No. _____

Business Address: _____

Email Address: _____

Name of Applicant: _____

Residence Address: _____

Home Phone No.: _____ Cell Phone No.: _____

Please include the following:

- Driver’s License, Passport or other photographic proof of identity and age
- Evidence of course completion in bloodborne pathogen training program (American Red Cross, OSHA, or Association of Professional Body Piercers).
- Evidence of current certification in First Aid and CPR
- Documentation of completion of a course on anatomy and physiology with a grade of C or better at a college accredited by the N. E .Assoc. of Schools and Colleges
- Evidence of at last two (2) years actual experience in the practice of performing body art activities of the kind one seeks to perform
- Proof of negative Mantoux screening (Tuberculosis)
- Copy of your policy for Infection Control

I certify, under the pains and penalties of perjury, that the information provided to the Board of Health is correct. I agree to abide by all terms and conditions set forth by the Board of Health.

Signature

Date