



Portage County Combined General Health District

999 East Main Street
Ravenna, Ohio 44266

www.portagehealth.net



Portage County Health District 330-296-9919

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Portage County WIC 330-297-9422

Columbiana County WIC 330-424-7293

Joseph Diorio, MPH, MS, REHS, Health Commissioner

Body Art Permit to Operate (Application and Checklist)

New Facility ☐

Renewal Application ☐

Owner/Operator *: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Occupation of the Owner/Operator: _____

Email address: _____

***Note:** If more than one owner, please include their information on a separate sheet of paper.

***Note:** If ownership belongs to an entity you must list this information for every person that owns 5% or more of the operation.

Name of Establishment: _____

Location of Establishment:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email address: _____

Hours of Operation

SUN

MON

TUES

WED

THURS

FRI

SAT

Portage County Combined General Health District is an Equal Opportunity Employer

Application and Checklist Continued

List of Body Artists

In accordance with Ohio Administrative Code 3701-9-02(C)(4) please list all artists who have received adequate training and will perform body art services in this body art establishment.

Name(s):

1. _____	Tattooing __	Body Piercing __	Microblading __
2. _____	Tattooing __	Body Piercing __	Microblading __
3. _____	Tattooing __	Body Piercing __	Microblading __
4. _____	Tattooing __	Body Piercing __	Microblading __
5. _____	Tattooing __	Body Piercing __	Microblading __
6. _____	Tattooing __	Body Piercing __	Microblading __

***If you are renewing your permit to operate and nothing has changed at your facility you may skip the following checklist. If you have updated or changed any of the information, procedures or artists at your facility please include ALL updated information in your application.**

Statement of Attestation:

***The following statement shall be signed by the owner(s)/operator(s) who by signing attest to their willingness to abide/comply by the rules set by the Ohio Administrative Code and Revised Code.**

In accordance with Ohio Administrative Code 3701-09-02(K), the board of health may, in accordance with rule 3701-9-09 of the Administrative Code, refuse to grant an approval or may suspend or revoke any approval issued to any person for failure to comply with the requirements of Chapter 3730. of the Revised Code or this chapter of the Administrative Code.

The Owner(s)/Operator(s) and/or Entity attest that the operator intends to comply with all requirements established by sections 3701.01 to 3701.99 of the Revised Code and the rules of this chapter.

Signature of Owner(s)/Operator(s)

Date

Name(s) Printed or Typed

Application and Checklist Continued.

Requirements to Apply for a Permit to Operate:

Ohio Administrative Code (OAC) 3701-9-02(A) In accordance with section 3730.02 of the Revised Code, no person shall operate a business offering body art services without first obtaining approval of the board of health in the jurisdiction in which the business will operate.

OAC 3701-9-02(B) No person shall construct, install, provide, equip, or extensively alter a body art establishment until all plans and specifications for the facility layout, equipment and operation have been *submitted to and accepted*, in writing, by the board of health of the city or general health district in which the business is located. Plans and specifications shall clearly show the applicable provisions of the rules in this chapter can be met and shall include, but not be limited to, the following:

*** If you are applying to RENEW an application to operate and nothing has changed at your facility, you may skip the following checklist. If there have been updates to artists, procedures, layout or any information about your facility please include this information when submitting this application. If you are applying to open a new body art facility in order to expedite the process of plan review the following items must be submitted with the completed application form. Once each item has been submitted and reviewed by the Portage County Health District an inspection will be scheduled to confirm compliance with the listed requirements.**

Checklist:

- _____ The total area to be used for the business is 100 square feet
- _____ Entrance and exits marked on a floor plan (The floor plan should be neatly and clearly drawn manually or digitally)
- _____ Number, location and types of plumbing fixtures, including all water facilities
- _____ Lighting plan for facility and actual work station lighting
- _____ Floor plan, showing general layout of fixtures and equipment
- _____ Listing **ALL** equipment to be used, including manufacturer and model numbers
- _____ Written verification from zoning and building departments that the building is approved for business
- _____ Process of decontaminating and disinfecting all environmental surfaces in the facility
- _____ Decontaminating. Packaging. Sterilizing and storing reusable equipment and instruments
- _____ Protecting instruments and sterile instruments from contamination during storage
- _____ Ensuring that standard precautions and aseptic techniques are utilized during all body art procedures
- _____ Safe handling and disposal of needles, blades, sharps (written procedures)
- _____ A written aftercare guideline for each specific procedure (i.e. body piercing, tattoo, microblading)
- _____ All surfaces in work space are smooth, durable and easily cleanable
- _____ A handwashing sink must be within close proximity to each body artist performing a procedure. **This sink must be separate from the restroom**
- _____ Proof of a safe and approved water source

Application and Checklist Continued.

- _____ Sufficient and appropriate waste receptacles
- _____ Proof of adequate training for each artist performing procedures at facility
- _____ A parental consent form for any individual under the age of 18 seeking a procedure

Application Fee:

*Please submit payment in the form of a check or money order payable to:

Portage County Health District.

Every person who intends to open a new body art establishment shall apply for an approval at the time the plans and specifications are submitted to the board of health. Approval remains valid for one year, unless earlier suspended or revoked under section 3730.05 of the Revised Code. A business's approval may be renewed. Approval is not transferable.

In accordance with Ohio Administrative Code OAC 3701-9-02(D)(E)(F), the annual fee and written authorization for the operation of the body art establishment shall be obtained for each calendar year prior to operating the body art establishment for the calendar year for which application is made.

***For Portage County Health District Use Only**

Applicant: _____
(Body Art Establishment Name)

Pre-Inspection For New Facility:

Inspector: _____

Date of Inspection: _____

Approved: Yes ___ No ___

Facility Renewal:

Approved by: _____

Action By: _____ Date: _____

Registration Number: _____

Fee Total: \$ _____

Cash or Check # _____

Receipt # _____ Date Paid: _____