County of Riverside

DEPARTMENT OF ENVIRONMENTAL HEALTH

www.rivcoeh.org

APPLICATION FOR REGISTRATION OF A FACILITY ENGAGED IN THE BUSINESS OF TATTOOING, BODY PIERCING OR PERMANENT COSMETICS

FULL NAME OF OWNER: _____ *DOB: _____

FACILITY DBA: _____

SITE ADDRESS: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BUSINESS PHONE: _____ CELL PHONE: _____

EMAIL: _____

***PROVIDE COPY OF CURRENT CALIFORNIA ID OR DRIVERS LICENSE**

CHECK ALL PROCEDURES TO BE PERFORMED:

[ ] TATTOOING
[ ] BODY PIERCING
[ ] PERMANENT COSMETICS
[ ] BRANDING

☐ Attach a copy of your facility's Infection Prevention and Control Plan

I certify that I am at least 18 years of age.

Signature of Applicant: _____ Date: _____

Mail completed application with payment check or money order to:
County of Riverside Department of Environmental Health
Environmental Protection and Oversight Division
P.O. Box 7909
Riverside, CA 92513

For more information call (951) 955-8980 or got to the **Department Web Site**-www.rivcoeh.org

----------**FOR DEH USE ONLY**----------

Department Approval/Title: _____ Date: _____

For our office locations call us at (888) 722-4234 or visit our website at www.rivcoeh.org