



**LOCAL GOVERNMENT (MISCELLANEOUS) PROVISIONS ACT 1982**

Application for Registration of **PREMISES** to carry on the [Practice of Acupuncture] [Business of (Tattooing) (Cosmetic Piercing) (Electrolysis) (Semi-permanent Skin Colouring)]

To: Head of Environmental Health  
Environmental Health Service,  
Ebley Mill, Westward Road,  
Stroud, Glos, GL5 4UB.

Telephone:- 01453 766321

**I/WE HEREBY MAKE APPLICATION** under the provisions of the above Act for registration to carry on the [Practice of Acupuncture] [Business of (Tattooing) (Cosmetic Piercing) (Electrolysis) (Semi-permanent Skin Colouring)] at the premises detailed below:-

(DELETE ANY WORDS IN BRACKETS WHICH DO NOT APPLY)

If you intend to carry out more than one of the activities listed above at the same premises only one fee will be charged.

**PARTICULARS**

1.	Name(s) of Applicant(s) (in full)	
2.	Home address(es) of Applicant(s) (ie usual place(s) of residence or, in the case of a company or firm, the registered or principal office)	
3.	Day time telephone number	
4.	Name and address of <b>PREMISES</b> to be registered	
5.	Description of premises, including number of rooms and particulars or arrangements for cleaning or premises, fittings and equipment and sterilisation of instruments. (Attach separate schedule if necessary)	
6.	Have you previously been registered in this respect in any other district? If so, which?	YES / NO
7.	Have you ever been convicted of any offence under the Act? If so, give details	YES / NO

A fee of £ \_\_\_\_\_ accompanies this application.

Date: .....

Signed .....

[on behalf of].....

<p><i>Serial No:</i> .....</p> <p><i>Considered:</i> .....</p> <p><i>Registered:</i> .....</p> <p><i>Licence No:</i> .....</p>	<p>Please return this form duly completed to:</p> <p><b>STROUD DISTRICT COUNCIL ENVIRONMENTAL HEALTH SERVICE EBLEY MILL, WESTWARD ROAD STROUD, GLOS, GL5 4UB</b></p>	<p><b>FOR OFFICE USE ONLY</b></p> <p>Date of Inspection .....</p> <p>Inspecting Officer .....</p> <p><b>RECOMMENDATIONS</b></p> <p>-----</p> <p>Amount Rec'd .....</p> <p>Date Rec'd .....</p> <p>Initials .....</p> <p>Cost Centre/A/c Code K36 3024 K802</p> <p>Receipt No .....</p> <p>Date Issued .....</p>
--	--	---