City of Rahway

Department of Health
One City Hall Plaza
Rahway, NJ 07065

Phone (732) 827-2085
Fax 732)381-7668
Health@cityofrahway.com

Body Art Establishment Application

Owner:_____ Phone:_____

Home Address: _____

_____

Business Name: _____ Phone: _____

Address:_____E-mail:_____

Days and Hours of Operation:_____

NJ Business Registration Number: _____

Applicant: _____ Individual _____Partnership _____Firm/Corporation

List all Partners and officers of Firm/Corporation: _____

_____

_____

Select all services that you are/will be providing:

Body Piercing _____ Tattooing _____ Permanent Cosmetics _____

Ear Piercing _____ Other (specify): _____

Please Circle One:

Water Supply

City Well

Sanitary Sewer

City Well

Solid Waste Removal Company: _____

Containers Dumpster

Name of Operator: ____

The following documentation must be submitted with this application for the operator:

- Verification of 12 months previous experience in operating a body piercing/tattooing facility
- One or more samples of advertising

Names of Practitioner(s):

____

Services Provided:

______Body Piercing (1000 hrs. of training)
______Tattooing (2000 hrs. of training)
______Permanent Cosmetics (100 hrs. of training)
______Ear Piercing (Certificate of training)
_______Other: ______________________________

Names of Practitioner(s):

____

Services Provided:

______Body Piercing (1000 hrs. of training)
______Tattooing (2000 hrs. of training)
______Permanent Cosmetics (100 hrs. of training)
______Ear Piercing (Certificate of training)
_______Other: ______________________________

Names of Practitioner(s):

____

Services Provided:

______Body Piercing (1000 hrs. of training)
______Tattooing (2000 hrs. of training)
______Permanent Cosmetics (100 hrs. of training)
______Ear Piercing (Certificate of training)
_______Other: ______________________________

Names of Practitioner(s):

____

Services Provided:

______Body Piercing (1000 hrs. of training)
______Tattooing (2000 hrs. of training)
______Permanent Cosmetics (100 hrs. of training)
______Ear Piercing (Certificate of training)
_______Other: ______________________________

The following documentation must be provided for each practitioner with the application:

- Certification of training for each of the services provided
- Provide evidence of completion of a blood borne pathogen course (body piercing and tattooing only)
- A minimum of 10 photographs of original work performed and three signed client testaments (body piercing and tattooing only)
- A minimum of 5 photographs of completed original work for each: eyebrow simulation procedures, lip lining or shading procedures, and eye liner/eyelash enhancer (permanent cosmetic only)
- For permanent cosmetics, provide a copy of certification from one of the following:
  1. American Academy of Micropigmentation permanent cosmetics practitioner;
  2. The Society of Permanent Cosmetic Professionals certified permanent cosmetic professional;
  3. The SofTap(R), Inc. permanent cosmetics practitioner
- Areola restoration requires a copy of 16-hour training program (permanent cosmetics only)
- Documentation of completion of training program (ear piercing only)
- Proof of professional malpractice liability insurance for each practitioner

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Medical Waste Company: _____

Medical Waste Generators Permit #: _____

Must submit a copy of the Medical Waste Permit

List all employees who have received the Hepatitis B Vaccination series:

_____

_____

_____

Autoclave:

Submit for review a photograph of steam autoclave with the make, model number and serial number.

Name of biological monitoring laboratory: _____

Telephone: _____

Will you be reprocessing reusable equipment? Yes No

Will you be needle building? Yes No

The following paperwork must be submitted with the application:

- A diagram of the floor plan showing the reception, procedure, cleaning and sterilization, storage areas and toilet facilities. Include all area measurements.
- Names and addresses of all manufacturers of processing equipment, instruments, jewelry, and inks used in all procedures
- Photograph of autoclave
- Negative biological of autoclave
- Copy of malpractice insurance for each practitioner
- Copy of informed consent for each procedure
- Copy of client application
- Policies for HBV vaccine series
- Policies for latex allergies
- Documentation of qualifications for all personnel
- Annual license fee

CERTIFICATION BY APPLICANT

I have received and read Chapter 27 of the New Jersey Administrative Code, and I certify that this Body Art Establishment meets these standards. I understand that obtaining a license by means of fraud, misrepresentation or concealment shall result in closure of the Body Art Establishment. I certify the statements made in this application are true, complete, and correct to the best of my knowledge and belief.

_____ _____

Name of Applicant (Print) Title of Applicant

_____ _____

Signature of Applicant Date

City of Rahway Health Department Use Only

Application Submitted _____ License# _____

Date _____ _____ Approved _____Denied

Signed By: _____

Chapter 149. Body Art Establishments

[HISTORY: Adopted by the City Council of the City of Rahway 5-14-2012 by Ord. No. O-12-12. Amendments noted where applicable.]

GENERAL REFERENCES

Massage, bodywork and somatic therapy establishments — See Ch. ***281****.*

§ 149-1. License required; fee; term.

A. It shall be unlawful for any person or corporation to conduct or perform body art procedures as defined in Chapter VIII of the State Sanitary Code, N.J.A.C. 8:27-1 et seq. without first procuring a license from the Division of Health or appropriate licensing authority or without complying with any or all of the provisions contained in Chapter VIII of the State Sanitary Code, N.J.A.C. 8:27-1 et seq.

B. The following fees shall be charged in connection with any application made for such a license:

- *(1) Plan review for establishment performing body art procedures: $100.*
- *(2) Annual licensing inspection for establishment performing tattooing or permanent cosmetics: $200.*
- *(3) Annual licensing inspection for establishment performing body piercing: $200.*
- *(4) Annual licensing inspection for establishment performing tattooing or permanent cosmetics and body piercing: $200.*
- *(5) Temporary license for establishment performing body art procedures (maximum three days): $1,000.*

C. All licenses issued hereunder shall expire on the 31st day of December of each year, unless such license is temporary, then its expiration shall be upon the closing of the event for which it was issued or as otherwise stated on the license.

D. Applications for temporary establishments performing body art procedures must be submitted to the Division of Health or appropriate licensing authority at least 15 days prior to the event.

E. No license or permit issued under this chapter may be transferred to another person, corporation or location.

§ 149-2. Violations and penalties.

Any person who violates or refuses to comply with any provisions of this chapter, including Chapter VIII of the State Sanitary Code, N.J.A.C. 8:27-1 et seq. herein referred to, shall be punished by a fine not exceeding $500 for each violation. A separate offense shall be deemed committed on each day during or on which a violation occurs or continues.