

Body Art License \$1000

2026

**BOROUGH OF HAWTHORNE
BOARD OF HEALTH**

445 Lafayette Avenue Hawthorne, NJ 07506

Phone **973.427.4012** Fax 973.427.1882

yrogers@hawthornenj.org

Form must be filled in completely before a license can be issued. PLEASE PRINT

Business Name _____

Business Address _____

Business Telephone _____

Business Owner Name _____

Home Address _____

Home Telephone _____ Email _____

Number of Stations _____ Number of Employees _____

New Jersey Bio-hazardous Waste Generator License Number _____

Owner, Manager, or Person in charge at premises:

Name _____ Phone _____

Address _____

**APPLICATION FEE IS NON-REFUNDABLE. LICENSES ARE NOT TRANSFERABLE AND
MUST BE RENEWED EACH YEAR BEFORE JANUARY 31ST.**

Late fee of \$50 applicable if not post marked by January 31st.

Applicant's Certification

I certify that I have read and understood the terms, requirements, and restrictions of Chapter 197 of the Code of the Borough of Hawthorne. I further certify that the facts set forth in the above application are true.

Signature of Applicant

Date

FOR OFFICE USE ONLY

License No. _____

Date Received _____

Amount Paid _____