



Civic Centre
Cnr Baylis & Morrow Sts
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APPLICATION FOR REGISTRATION HAIRDRESSER, BEAUTY OR SKIN PENETRATION PREMISES

NSW PUBLIC HEALTH ACT 2010

PREMISE DETAILS

Trading Name:

Business Address:

Postal Address:

Proprietor:

Business Phone: Fax:

Mobile: Email Address:

Type of Business: Fixed Commercial Home based Mobile premise

TRADING HOURS.....

STAFF DETAILS

Number of full time employees: Number of part time employees:

ADDITIONAL INFORMATION REQUIRED

- All premises must provide a floor plan outlining, rooms, equipment, fixtures and fittings in the premise. (e.g. include beds, sinks, storage areas, floor, wall and ceiling finishes).
- Mobile premises must provide registration details and a description of the vehicle.

ANY ADDITIONAL NOTES

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Please indicate procedures carried out on premises:

- | | | |
|---|---------------------------------------|---|
| <input type="checkbox"/> Hairdressing | <input type="checkbox"/> Body waxing | <input type="checkbox"/> Body piercing |
| <input type="checkbox"/> Barber | <input type="checkbox"/> Tanning | <input type="checkbox"/> Scarring |
| <input type="checkbox"/> Beauty therapy | <input type="checkbox"/> Acupuncture | <input type="checkbox"/> Blood testing |
| <input type="checkbox"/> Pedicure | <input type="checkbox"/> Electrolysis | <input type="checkbox"/> Colonic lavage |
| <input type="checkbox"/> Manicure | <input type="checkbox"/> Tattooing | <input type="checkbox"/> Cosmetic tattooing |
| <input type="checkbox"/> Facial waxing | <input type="checkbox"/> Ear piercing | <input type="checkbox"/> Other (please specify) |

PLEASE NOTE:

- A skin penetration operator must not carry out a procedure unless they are registered with the local council.
- You must also notify Wagga Wagga City Council when any of the above details change, including business ownership, location or the procedures conducted.

SIGNATURES:

Name of Proprietor:.....

Signature:..... **Date:**.....

OFFICE USE ONLY:

Reference Code:

Officer:

Date:

PLEASE RETURN TO:

**WAGGA WAGGA CITY COUNCIL'S PUBLIC HEALTH DEPARTMENT
CIVIC CENTRE – CNR BAYLIS AND MORROW STREET, WAGGA WAGGA
PH: 1300 292 442 FAX: 02 6926 9309**

THANK YOU