

## ADAMS COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT APPLICATION FOR TATTOO/BODY PIERCING PERMIT

Preserving & strengthening individuals, families and the community

In accordance with Adams County Public Health Ordinance #20-16, I do hereby make application to the Adams County Health and Human Services Department for an operating permit for the license year July 1, 2024 to June 30, 2025. Inspection and licensing services are being provided by the Wood County Health Department. **Operating in any part of the fiscal year requires a permit**.

## PERMITS ARE NOT TRANSFERABLE

Establishment Name

Establishment Address	City	Zip	
Owner Name	email		
(List the individual, partnership, or corporation na	me and the agent)		
Owner Address	City	Zip	
Preferred mailing address for license and correspond	ondence:   Owner   E	stablishment	
Phone: Establishment	Home	(if applicable)	
Signature of Applicant			
BODY ART:			
	Licensing Insp Fee	License Fee	
□ Tattoo Establishments	\$125.00	\$177.00	
□ Body Piercing Establishments	\$125.00	\$177.00	
☐ Combined Tattoo/Body Piercing Establishments	\$150.00	\$284.00	
<ul> <li>Temporary Tattoo/Body Piercing or Combined Establishment per Event</li> </ul>	N/A	\$110.00	
Water Supply	☐ Private	☐ Public	
Annual Water Testing Fee Per Well (if on a private well, bacteria and nitrate only)	Number of wells	(x) \$ 50.00	
Additional charges may apply for repeat sampling			
Tattoo/Body Piercing Practitioner Name and License #	OVER-		

Additional Practitioners <u>Name</u>		<u>License Number</u>		
OTHER FEES			<b>0170</b> CC	
<ul> <li>□ NSF Fee (includes account closed or check non-payable)</li> <li>□ Operating without a License</li> <li>□ No Certified Operator will be given 30-day warning for first offense</li> <li>□ Special Inspection</li> </ul>		\$150.00 Double License Fee \$150.00 \$175.00		
<ul> <li>□ Duplicate Permit</li> <li>□ Re-inspection Fee (\$200.00 for each additional re</li> </ul>	epeat insp	pection)	\$ 20.00 \$ 100.00	
		Total	\$	
Pre-Licensing Insp. Fee License Fee \$ Ot \$	ther Fees	(if applicable) =	Total Fees \$	

Forward completed application and fee to:

Phone (715) 421-8911 or (715) 387-8646

Wood County Health Department Attn: Environmental Health 111 W Jackson Street Wisconsin Rapids WI 54495

Make check or money order payable to: Wood County Health Department