



**Rockdale Environmental Health Services**  
1329 Portman Drive – Suite F  
Conyers, GA 30012  
Phone: 770.278.7340  
Fax: 770.278.8919  
[www.gnrhealth.com](http://www.gnrhealth.com)

## BODY ART STUDIO APPLICATION

Date: \_\_\_\_\_

Name of Body Art Studio: \_\_\_\_\_

Address of Body Art Studio: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Building Owners Name: \_\_\_\_\_

Building Owners Address: \_\_\_\_\_

\_\_\_\_\_

Full Legal Name of Body Art Studio Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

*If owner is a partnership submit names of partners and address; If owned by a corporation submit the date and place of the corporation and the name and address of the registered agent*

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Hours of Operation:

Sunday \_\_\_\_\_ Thursday \_\_\_\_\_

Monday \_\_\_\_\_ Friday \_\_\_\_\_

Tuesday \_\_\_\_\_ Saturday \_\_\_\_\_

Wednesday \_\_\_\_\_

Types of Procedures and Services offered: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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Please attach the following items to this application:

1. A quarter inch per foot scale drawing of the body art studio (new construction only).
2. A complete description of all services which will be provided in the body art studio.
3. If the Owner of the body art studio is a partnership, the names and addresses of all partners; if the Owner is a corporation, the date and place of incorporation and the name and address of its registered agent in the State; or if the Owner is any type of association, the names and principals of the association.
4. A list containing the full names of all the employees and staff who will be working in the body art studio.
5. A copy of the written statement of policies and procedures of the body art studio The Owner's written statement of policies and procedures shall include that:
  - No person under the age of eighteen (18) shall perform body art procedures on individuals.
  - Body Artists shall not be under the influence of alcohol and/or pharmaceuticals (legal or illegal) while performing body art procedures.
  - No person shall perform body art procedures on an individual who reasonably appears to be under the influence of alcohol, drugs, or for other reasons cannot give informed consent as required by O.C.G.A. §31-40-5(a)(3).
  - No animals of any kind shall be allowed in a Body Art Studio except service animals used by persons with legally recognized disabilities so long as the service animals do not pose a clear risk to the health of the Body Artists or customers.
  - No body art procedure shall be performed on a person under the age of eighteen (18) without the consent of a parent or guardian. The parent or guardian must be present when the body art procedure is performed.

The undersigned hereby applies for a body art studio permit to operate a body art permit pursuant to the Rules and Regulations of the Rockdale Board of Health for Body Art Studios and hereby certifies that he/she acknowledges that they have read and understands these rules and regulations. The undersign hereby acknowledges that body art studio permits are not transferable and are no longer valid if the body art studio changes name, ownership, location, or ceases to operate. The undersigned hereby agrees to return any such invalidated permit to Rockdale County Environmental Health within seven days of the permit's becoming invalid. The undersigned hereby certifies that the information included in this application is correct and that if any deviation is made without permission from Rockdale County Environmental Health may nullify final approval of such permit.

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_