



CITY OF SALEM, MASSACHUSETTS

BOARD OF HEALTH
120 WASHINGTON STREET, 4TH FLOOR
TEL. (978) 741-1800
FAX (978) 745-0343
lramdin@salem.com

KIMBERLEY DRISCOLL
MAYOR

LARRY RAMDIN, RS/REHS, CHO, CP-FS
HEALTH AGENT

APPLICATION FOR PERMIT TO PRACTICE BODY ART

PERMIT FEE: \$135.00 PER PRACTITIONER

APPLYING FOR:

PERMIT TO PRACTICE BODY PIERCING_____

PERMIT TO PRACTICE TATTOOING_____

PERMIT TO PRACTICE MICRO-PIGMENTATION_____

PERMIT TO PRACTICE AS AN APPRENTICE_____

PERMIT TO PRACTICE AS A GUEST ARTIST_____

NAME OF APPLICANT_____

ADDRESS OF APPLICANT_____

PHONE NUMBER OF APPLICANT_____

NAME OF PERMITTED ESTABLISHMENT YOU WILL BE PRACTICING IN
_____ ADDRESS_____

An applicant for a permit shall show to the satisfaction of the Board of Health that he or she has complied with the following minimal training requirements for body art practitioners:

Applicant for this permit must show proof of age over 18 years as proven by a government issued photo identification card._____

Body art practitioners must perform body art only in permitted body art establishments._____

Provide documentation for high school diploma, or its equivalent._____

Provide certificate of completion of basic training in First Aid and CPR, as well as recertification classes._____

A certificate of completion of an OSHA course on the prevention of disease transmission and Blood borne Pathogens._____

Proof that you have held a license to practice body art for one year in another municipality or state, or have completed at least one year of apprentice training as a tattooist under a licensed body art practitioner in the specific discipline._____



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For body piercers: 1.) Completion of an acceptable Anatomy and Physiology course. 2.) Proof of membership as a Professional Member or Professional Member at Large by the Association of Professional Piercers, or an equivalent professional organization. _____

For tattooists: 1.) Completion of an acceptable Anatomy course for tattoo practitioners for those applying for a Tattoo Practitioners Permit. 2.) Proof of membership as a Professional Tattooist by the Alliance of Professional Tattooists or an equivalent Professional Tattooing organization. _____

For Micro-Pigmentation Artists: 1.) Completion of an acceptable Anatomy course for tattoo practitioners for those applying for a Tattoo Practitioners Permit. 2.) Documentation of successful completion of a one year micro-pigmentation apprenticeship. 3.) Successful completion of forty (40) hours of formal training in a course approved and certified by the American Academy of Micro-Pigmentation or equivalent Professional Tattooing organization. _____

For Body Art Apprentices: In order to function as an apprentice, the qualifying individual must obtain from the Board of Health a Tattoo Artist permit with the specification of the apprenticeship clearly stated. The apprenticeship shall last no longer than two (2) years. The first year will focus on learning and class work, including an acceptable anatomy course for body art practitioners. In addition, on the job training will address general principals of set up including but not limited to observation, sterilization, clean up and bandaging. The second year will focus on learning the art of body art.

For Permanent makeup/Micro Pigmentation Apprenticeship: Shall provide proof that he/she has achieved full compliance with the requirements for Body Art Apprentices, and is continuously supervised while engaged in the application of Permanent Make-up by a licensed Tattoo Artist who is authorized to perform Permanent Make-up Application, and who is also certified by the Academy of Micro Pigmentation as an Associate Member.

For Guest Artists: The guest artist works under the auspices of the permitted body art establishment. Practitioners will be limited to practicing no more that thirty (30) days per calendar year in the capacity of Guest Artist.

I verify that I have read the Salem Board of Health Body Art Regulations. I have had the opportunity to ask questions, and agree to abide by it.

Signature: _____ **Date:** _____

In addition, pursuant to MGL C62C S49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all taxes required under the law.

Signature: _____ **Date:** _____