



Temporary Body Art Facility Information

Temporary body art facilities in San Bernardino County are required to obtain a valid health permit or be subject to closure. Health permits are non-transferable and must be posted in a visible place within the temporary body art booth or location. In order to obtain a valid health permit, the steps listed below must be submitted to Environmental Health Services (EHS).

Temporary Body Art Facility Requirements as stated in the Safe Body Art Act:

- Obtain approval from the Sponsor of the Body Art Event.
- Complete an *Application for A Body Art Facility Temporary Event Health Permit*. The application should be submitted no less than two weeks before the temporary body art event.
- Pay all [applicable fees](#) for a Temporary Body Art Facility (Participant).

A practitioner may, in the local jurisdiction of registration, practice in a temporary demonstration booth for **no more than seven days in a 90-day period***. The demonstration booth must meet **all** of the following requirements:

- Be located within a *building* that provides direct access to hand washing facilities with hot and cold running water, soap, and single-use paper towels.
- Constructed with a partition of at least three feet in height separating the procedure area from the public and provide 50 feet of floor space for each practitioner.
- Be free of insect or rodent infestation.
- Be used exclusively for performing body art.
- Equipped with adequate light available at the level where the practitioner is performing body art.
- Equipped with hand washing equipment that, at a minimum, consists of containerized liquid soap, single-use paper towels, a five-gallon or larger container of potable water accessible via spigot, and a wastewater collection and holding tank of corresponding size. Potable water shall be refilled and the holding tank evacuated at least every four procedures or every four hours, whichever occurs first.
- Do not allow animals within the confines of the demonstration booth.
- No more than four artists per exhibit booth at any one time.
- Be operating with all necessary permits to conduct business, including a valid health permit issued by EHS. A sponsor or practitioner who violates these requirements shall be subject to closure of the temporary body art event and a penalty of up to three times the cost of the permit.

Temporary health permits will only be issued for temporary body art facilities (participants) that will be operating at an approved body art event. The event must have a permitted sponsor in accordance with Safe Body Art requirements.

**A valid and current practitioner registration issued by a local enforcement agency (including out of state registrations) shall be valid in any other jurisdiction for no more than five consecutive days, or 15 days total, in any one calendar year.*



APPLICATION FOR A TEMPORARY EVENT BODY ART FACILITY HEALTH PERMIT

| SECTION A HEALTH PERMITS ARE NOT TRANSFERABLE | | | |
|--|---------------------|---------------------------------|-----------------|
| APPLICANT INFORMATION | | | |
| Name of Applicant: | Birthdate: | Phone Number: | |
| Company/Organization (if applicable): | | E-Mail: | |
| Home Address: | City: | State: | Zip: |
| Mailing Address (if different): | City: | State: | Zip: |
| DETAILS OF TEMPORARY EVENT | | | |
| Name of Event: | | | |
| Date(s) of Event: | | Total Number of Days for Event: | |
| Set Up Time: ____:____ a.m. p.m. To: ____:____ a.m. p.m. | | | |
| Open to Public: ____:____ a.m. p.m. To: ____:____ a.m. p.m. | | | |
| Name of Event Sponsor/Coordinator: | | | |
| Event Sponsor/Coordinator Cell Phone Number: | | | |
| SECTION B TEMPORARY BODY ART FACILITY DETAILS | | | |
| Name of Event: | | | |
| <p>A completed Application for Temporary Event Body Art Facility Health Permit must be submitted at least 48 hours prior to the event. Health permits are non-transferable and must be posted in a conspicuous place within the temporary body art booth or location.</p> <p>Temporary Body Art Facility Health Permits will only be issued for temporary body art facilities (participants) that will be operating at an approved body art event. The event must have a permitted sponsor in accordance with AB 300 requirements.</p> <p>A practitioner* may, in the local jurisdiction of registration, practice in a temporary demonstration booth for no more than 7 days in a 90-day period.</p> | | | |
| Select the Types of Activities: Tattoo Body Piercing Permanent Cosmetics Branding | | | |
| I hereby acknowledge and agree to abide by the requirements as stated on the Temporary Body Art Facility Information sheet. | | | Initial: |
| PRACTITIONER INFORMATION | | | |
| (maximum 4 artists per booth) | | | |
| Name | Registration Number | *County of Registration | Expiration Date |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| *A valid and current practitioner registration issued by a local enforcement agency other than <i>San Bernardino County</i> shall only be valid for five consecutive days, or 15 days total, in a calendar year. Attach additional paperwork if necessary. | | | |

DECLARATION AND SIGNATURE

ALL FEES ARE DUE AND PAYABLE PRIOR TO THE FIRST DAY OF OPERATION.

Make checks payable to: COUNTY OF SAN BERNARDINO

This application and all subsequent fees must be submitted at least two weeks prior to the event. A late fee will be assessed if the application is not completed a full 48 hours prior to the day of operation (***Example: Fees are due on Wednesday for a Saturday event***). Failure to complete the application and pay all fees will result in the assessment of a delinquent fee or closure.

I declare under the penalty of law, that to the best of my knowledge and belief, the statements made herein are correct and true. I certify that I am at least 18 years of age. I have knowledge of, and commitment to meet state law and relevant local regulations pertaining to body art safety. I hereby submit this application for health services in accordance with the laws, ordinances and regulations that are now and may herein after be in force by the Federal Government, State of California, and San Bernardino County pertaining to Body Art. I hereby consent to all necessary inspections incident to the issuance of a health permit and the operation of the business. Furthermore, I understand that failure to meet all requirements of the Safe Body Art Act and San Bernardino County will result in closure of my temporary body art facility.

| | |
|------------|-------|
| Signature: | Date: |
|------------|-------|

| | |
|-------------|--------|
| Print Name: | Title: |
|-------------|--------|

For Office Use Only

| | | | |
|---------------------|----------------------|------------|--------------|
| Fee: | FA Number: | Record ID: | PE Number: |
| Late Fee: Yes No | Designated Employee: | | Received By: |
| Check One: New | Transfer | Reactivate | |
| Changes (specify): | | | |