

**APPLICATION  
FOR  
TATTOO ARTIST LICENSE**

**Application Fee: \$25.00 Paid: \_\_\_\_\_      License Fee: \$50.00 Paid: \_\_\_\_\_**

**Expires: December 31, 2022**

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

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Applicant's weight: \_\_\_\_\_ height: \_\_\_\_\_ eye color: \_\_\_\_\_ hair color: \_\_\_\_\_

Written evidence that applicant is at least eighteen (18) years of age: \_\_\_\_\_

\_\_\_\_\_

Business, occupation or employment of the Applicant for the three (3) years immediately preceding the date of application: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tattoo Establishment where you will be working: \_\_\_\_\_

Have you ever been convicted of any crime, except misdemeanor traffic violations?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please state the place and court in which such conviction was obtained and the sentence imposed as a result of such conviction.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I hereby certify that all information provided as part of this application is true and correct.*

Signature: \_\_\_\_\_