## Shasta County Department of Resource Management **Environmental Health Division**

1855 Placer Street, Suite 201, Redding CA 96001 Telephone (530)225-5787 Fax (530)225-5413 www.ehd.co.shasta.ca.us

## PLAN REVIEW APPLICATION FOR A BODY ART FACILITY

•	Facility – Major \$362.14 ☐ Mobile Facility – Minor* \$160.95	Body Art Facility - \$362.14	Type Fee \$	
Applicant		Phon	Phone	
Owner				
Facility Name				
Facility Address		e-mail		
REQUIRED APPLIC	ATION ATTACHMENTS:			
<ul><li>Informed Cli</li><li>Pre-procedure</li></ul>	of the Infection Prevention and Controllent Consent Form The Questionnaire Form The Procedure Instructions The Facility	ol Plan (IPCP)		
Sewage Disposal:	Public/Community Sewer Name of Public/Communi	or On-Site Water Treatment Sy		
Water Supply:	Public Water System or F Name of Public Water Sys	Private Water System		
Methods of Sterilizat (Facilities without a instruments §11931	on of Needles/Equipmentecontamination/ sterilization area sha 5 (f))	ull use only purchased, disposat	ole, single-use, pre-sterilized	
Methods of Sharps D	sposal		<u> </u>	
List of Body Art prod	edures to be conducted			
* If a new body art fa	cility is wanting to go into a previousl	ly permitted location, the mino	r plan review fee will be charged.	

However, the documents listed above are still needed.

Review by your local building department may be necessary because permits for building, plumbing, and/or electrical changes, additions or modifications shall be issued by the applicable local enforcement agency -- §119312 (h). Check with your local building department for plan review submittal requirements -- §119312 (h).

NOTE: A facility shall not open without a valid permit to operate. In order to obtain a permit, submit proper permit application, pay applicable fees, and contact the Shasta County Environmental Health Division for a pre-opening inspection.

Received By	Date	Amount	Cash	Check
		\$		