



LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

APPLICATION FOR REGISTRATION OR TO UPDATE DETAILS ON AN EXISTING REGISTRATION

IN RESPECT OF ACUPUNCTURE, TATTOOING, COSMETIC PIERCING,

SEMI-PERMANENT SKIN COLOURING AND ELECTROLYSIS

Guidance at the end of this form provides details on who and what needs to be registered under the legislation but there are two registration requirements. One in respect of the premises where a piercing activity takes place, and then also for the person / business carrying on the business of skin piercing (or practice of acupuncture). Depending on your circumstances you may therefore need one or two registrations.

1. Full Name of Applicant _____

2. Address of Applicant _____

3. Trading Name _____

4. Telephone Number _____

5. E-mail address: _____

(We will send all written communication about this application and any future matter related to your registration to this address.)

6. Type of Skin Piercing Activity (please tick the types of skin piercing you want to register)

ACUPUNCTURE ☐

TATTOOING ☐

ELECTROLYSIS ☐

SEMI-PERMANENT SKIN COLOURING ☐

COSMETIC PIERCING ☐

If you have already registered in Milton Keynes to carry on the business of skin piercing concerned (or practice of acupuncture) then you do not need to re-register yourself but you should update any personal change of address and we will also issue a revised registration to you (see overleaf). You may need to register the premises where the activity takes place though

7. What premises address and name will the activity take place at?

8. Are the premises in 7 above already registered for this use/ these uses? Yes/No

If yes, what is the registration number:

If the premises are already registered for the activity concerned and you are operating under that registration specifically, then the premises do not need to be registered again.

9. Room(s) where the activities are to be carried out. _____

10. Location of the wash hand basin to be used in connection with the activities

11. Please detail the means of sterilising needles equipment

12. Location of sink to be used for washing equipment etc. _____

13. EAR PIERCING ONLY

Ear Piercing system to be used with sealed sterile packs of studs etc _____

14. ALL APPLICATIONS

Has the applicant been convicted of any offence under the provisions of Section 16 of the Local Government (Miscellaneous Provisions) Act 1982 (re failure to register or contravention of byelaws made concerning skin piercing?) IF SO, GIVE FULL DETAILS:

15. What professional body/association do you belong to? _____

16. What is your registration number of this?

I wish to apply to Milton Keynes Council to register: -

PLEASE TICK (✓) as appropriate

- 1) Registering as a person carrying on the practice of acupuncture ☐
- 2) Registering a Person or Business activity (except acupuncture) ☐
- 3) Adding an additional skin piercing activity to an existing registration (person, business, or a premises) ☐
- 4) Registering a premises for skin piercing activity ☐
- 5) Registering premise and a person /business at the same time for the first time (discounted combined fee applies) ☐
- 6) Adding activities to an existing registered premise and a personal / business Registration (discounted combined fee applies) ☐
- 7) I am already registered but have moved home address / changed my name and require updated personal certificates. My registration number is: ☐
- 8) I am already registered but am now working at a different premise that is already registered. I require updated certificates. ☐

My registration number is:

The premises registration is:

Refer to the [Regulatory Services - Licensing Fees](#) table

Total payment required £_____

If you require a special events registration for a convention etc then please contact us separately as the fee level will depend on the size of the event

PAYMENT

This application must be accompanied by the appropriate fee. How would you like to pay?

- ☐ Cheque (payable to Milton Keynes Council)
- ☐ Debit or credit card (we will call you when your application is received)

Please return to: - Licensing, Milton Keynes Council, Civic, 1 Saxon Gate East, Central Milton Keynes, MK9 3EJ (or email licensing@milton-keynes.gov.uk)

Date: _____ Signature: _____

MKC collect and use information about you so that we can provide you with council services. Full details about how we use this data and the rights you have around this can be found at www.milton-keynes.gov.uk/privacy. If you have any data protection queries, please contact the Data Protection Officer at data.protection@milton-keynes.gov.uk

Guidance Notes

There are two separate registration requirements – one for the premises where skin piercing takes place, one for the person who is carrying on the business of skin piercing (or in the case of acupuncture, carrying on the practice).

Premises

Premises registrations cannot be transferred to another premises – each address must have its own registration. If you relocate a business to a new address a new premises registration will be required

Skin Piercers (carrying on the business of)

Individuals who are self-employed are carrying on a business so will need a registration in their name. This is portable and you don't need to re-register yourself just because you move to different places within Milton Keynes. You may need to update your certificate though for the correct address and the place where you carry on your business will need a premises registration for what you are doing.

Individuals who are employees of a business are not carrying on a business so will not need a separate registration in their name.

Acupuncturists

There is an exemption in the law that says registration does not apply to practices carried out by or under the supervision of a person who is registered as a medical practitioner. We define a medical practitioner as a doctor registered with the General Medical Council or a dentist.

What do you need to demonstrate on an inspection?

The Byelaws specify matters in more detail, but the premises and equipment used need to be suitable, and the person needs to demonstrate how they will prevent cross contamination.

As a result, the inspector will look for the following:

- A wash hand basin in the treatment room or very nearby for the sole use of the operator (using a shared kitchen sink, or a sink in the bathroom or toilet will not be acceptable);
- Hot and cold water;
- A sharps contract and a suitable way of disposing of other waste;
- No eating and no drinking signs to display in the treatment room;
- You will need to show the inspecting officer what you use to clean surfaces in between clients;
- What you use to clean the client's skin prior to a treatment;
- How sterile products are stored;
- Couch roll will need to be available;
- What inks you will be using, and proof that they are sterile;

- What disposable gloves you will be using (preferably latex free);
- You will need to show the officer what you will be using to pierce the skin, and that it is single use, or if not, how it is sterilised between clients and kept sterile until use;
- If disposable equipment is used, you will need to provide proof needles etc. are sterile;
- There must be no carpet in the treatment area;
- How jewellery for piercing is ensured sterile;
- Pre and post treatment information.