

## Temporary Body Art Event Sponsor Application Guidelines

The Public Health Department, Division of Environmental Health, will work closely with sponsors to assist them in ensuring a safe body art event. Sponsors of body art events having temporary body art facilities are required to apply for and obtain a permit to hold the event and must comply with the California Health and Safety Code's Safe Body Art Act requirements. Please submit the attached application and forms with fees to Imperial County Division of Environmental Health, 797 Main Street, Suite B, El Centro, CA 92243 Monday through Friday, 8AM-12PM & 1PM-5PM, holidays excluded. Application and supporting document must be submitted a minimum of 30 days prior to the event. Failure to do so may result in denial of your permit application. Each body art businesses planning to operate a temporary body art facility at the event must submit an "Application for a Temporary Body Art Facility Permit". Each body art practitioner operating at the event must hold a valid certificate of registration from the county of practice. It is the responsibility of the event organizer to provide all permit applications to body art booths and any applicable guidelines for compliance, and returning such applications to Environmental Health 30 days prior to the event. Practitioners are not permitted to operate without having first obtained their permit from Environmental Health.

- A. The temporary body art event sponsor is responsible for obtaining all necessary permits required to conduct business in the jurisdiction where the event will be held.
- B. Event organizer shall not allow a person to perform body art at the event unless the person has a valid/current body art practitioner registration from a local jurisdiction within California. Each practitioner shall post their certificate of registration, or have it available for inspection.
- C. Event must be held inside of a building with smooth, cleanable flooring and restrooms that have flush toilets supplied with toilet paper, and hand wash sinks supplied with hot and cold potable running water, soap, and single-use paper towels.
- D. Temporary body art booth area shall have a partition of at least 3 feet in height separating the procedure area from the public.
- E. At least 50 square feet of floor space must be assigned to each practitioner.
- F. For temporary body art events consisting of two or more demonstration booths, practitioner hand wash areas shall be provided throughout the event. Hand wash stations areas shall be located within partitions at least 3 feet in height, separating hand wash stations from the public. Such areas shall be equipped with a commercial, self contained hand wash station consisting of containerized liquid soap, single-use paper towels, a storage capacity of five gallons or more of potable water, and a trash receptacle. The event organizer shall provide one hand wash area for every two demonstration booths at the event. \*\*Provide a copy of the contract/receipt/tracking document to Environmental Health
- G. A back-up supplies purchase station shall be available at the event, in compliance with subdivision (d) of Section 119315. Items such as pre-sterilized tattoo needles, pre-sterilized needle tubes, pre-sterilized piercing instruments, plastic bags, barrier film, clip cords covers, plastic wrap, ink cups, nitride and latex gloves, single-use tubes or water-based and petroleum-based lubricants, absorbent dressing material, and all forms required to conduct body art such as client consent forms, medical questionnaires, aftercare instructions, and single use instrument logs.
- H. A decontamination and sterilization area that is separated from a procedure area by at least 5 feet, or by a cleanable barrier, shall be provided if reusable equipment is used or jewelry has not been sterilized. Provide information on autoclave and ultrasonic machine and provide a spore test from within the last 30 days of the start of the body art event.
- I. The body art sponsor shall use a licensed medical waste disposal company for removal of all sharps waste containers used during the body art event. Provide name, address, and phone number of medical waste disposal company.  
\*\*Provide a copy of the disposal receipt/tracking document to Environmental Health
- J. Each temporary body art facility shall be provided with a sharp disposal container labeled with the words "SHARP WASTE" or with the international biohazard symbol.
- K. Assign frequent trash pickup, wastewater removal, and potable water recharge for hand wash areas as provide uninterrupted use.
- L. The name, telephone number, and directions to an emergency room near the temporary body art event shall be posted in a conspicuous location.
- M. The body art procedure booths shall be equipped with adequate lighting
- N. Animals/food/drinks are not allowed within the confines of the demonstration booth.
- O. The body art booth shall be used exclusively for performing body art.
- P. The sponsor is responsible for ensuring the availability of body art support facilities and supplies for body art practitioners participating in the event. Persons organizing or controlling community events must ensure that all body art practitioners comply with applicable requirements.

## Application for a Body Art Event Organizer Permit

(Submit 30 days in advance of the event)

### Event Information

Name of event:	Date(s):	
Site address of event:		
Time when body art booths will set up:	Event start time:	Event stop time:
Expected number of body art booths:	Expected number of body art practitioners:	Expected public attendance:
Events will be held: Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>	Total number of flush toilets:	Total number of fixed hand sinks:
<i>**restrooms must be fully stocked with toilet paper, hand soap, and paper towels during the length of the event and within 200 feet from body art booths.</i>		
Indicate flooring material:		
Will food/beverages/alcohol be sold or given away at the event? <b>**permit may be required</b>		

### Event Organizer Information

Event organizer (business, organization, or entity):	Event organizer contact person:	
Mailing address:	Contact number:	Alternative number:
E-mail address:	Fax number:	Alternative number:

### Operation Information

How many practitioner hand wash stations will be provided? \_\_\_\_\_

**\*\*Hand wash stations shall be commercial, consisting of containerized liquid soap, single use paper towels, a storage capacity of gallons or more of potable water, and a trash receptacle. The event organizer shall provide one hand wash station per two demonstration booths. A copy of invoice/contract shall be provided to Environmental Health.**

Service provider: \_\_\_\_\_

Service provider address: \_\_\_\_\_

Describe how wastewater collected from the hand washing units will be properly disposed:  
\_\_\_\_\_

Body art booths must be located within a building, with a partition at least 3 feet high to separate the procedure area from the public, and equipment with adequate light and a minimum of one (1) sharps container for each body art booth.

Identify who will be responsible for this requirement:  Event Organizer     Body Art Operator

Will cleaning and sterilizing facilities be provided for body art practitioners?  Yes     No

**\*\* Provide information on autoclave and/or ultrasonic machines and a copy of a spore test within the last 30 days of the start date of the event.**

**\*\* If no, the event organizer must communicate the necessity for each practitioner to bring sufficient single-use supplies for the operation of the entire event.**

**\*\*\*Note: Adequate back-up supplies must be available for practitioners throughout the length of the event. Provide contact information of the person/business providing body art supplies.**

Imperial County Public Health Department, Division of Environmental Health  
 797 Main Street, Suite B, El Centro CA 92243  
 Phone: (442) 265-1888 Fax: (442) 265-1903  
[www.icphd.org](http://www.icphd.org)

**Waste Disposal**

Provide the number of sharps containers per booth: \_\_\_\_\_

Provide the number of trash containers per booth: \_\_\_\_\_ How often are trash containers emptied? \_\_\_\_\_ times/day

Provide a copy of the agreement with the company for removal of all sharps waste containers. Provide the information below for the sharps waste disposal company.

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

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

Telephone: \_\_\_\_\_

**Please submit application package to:**

Imperial County Public Health Department, Division of Environmental Health  
 797 Main Street, Suite B, El Centro, CA 92243

Please note that the application package will not be deemed complete if the following documents are not complete and submitted 30 days prior to the event:

- (1) Application for Body Art Event Organizer Permit
- (2) List of Proposed Body Art Booths
- (3) Additional supporting documentation, such as invoices/contracts

Please read the following statement, then sign and date below:

I understand I shall provide a list of all booth operators participating in the event; to have back-up supplies available for purchase; and post in a conspicuous place the name, telephone number, and directions to an emergency room near the event.

I understand that all body art practitioners who will be participating in the event must be registered beforehand, including bloodborne pathogen training and Hepatitis B vaccination status.

I have completed the application to the best of my ability. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that failure to provide required information will delay or prevent of the event.

I understand that failure to meet the conditions approved in this application may result in the suspension of the approval to operate the event, suspension of the approval to operate the affected body art booth.

I understand that I am responsible to obtaining approval from all applicable agencies.

I understand that once the application is reviewed the application fee is non-refundable.

_____ Print Name of Authorized Representative	_____ Title
_____ Signature of Authorized Representative	_____ Date

Imperial County Public Health Department, Division of Environmental Health  
 797 Main Street, Suite B, El Centro CA 92243  
 Phone: (442) 265-1888 Fax: (442) 265-1903  
[www.icphd.org](http://www.icphd.org)

For Office Use Only			
FA# _____	PR# _____	IN# _____	District#: _____
Amount Received: \$ _____	Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Check	Check #: _____	
Date Received: _____	Received by: _____		
Application: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected	By: _____	Date: _____	

### List of Proposed Body Art Booths

(Please note, body art booths must also apply for an individual booth permit)

Name of event: \_\_\_\_\_ Event Organizer: \_\_\_\_\_

Event Organizer Contact Person: \_\_\_\_\_ Contact number: \_\_\_\_\_

Date(s) or Event: \_\_\_\_\_ Site Address of Event: \_\_\_\_\_

	Name of Booth	Body Art Practitioners Name & contact phone number	
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____
		Name: _____	Contact Number: _____
		County of Practice: _____	Registration #: _____

Imperial County Public Health Department, Division of Environmental Health  
 797 Main Street, Suite B, El Centro CA 92243  
 Phone: (442) 265-1888 Fax: (442) 265-1903  
[www.icphd.org](http://www.icphd.org)

### Event Site Plan

Please sketch a site plan below or attach a site plan indicating proposed locations of body art booths, eye wash stations, dumpsters, garbage receptacles, shared decontamination/sterilization facilities, practitioner-only hand wash stations, wastewater holding containers and disposal points, potable and non-potable water supply, and restrooms located within a distance of 200 feet of all temporary body art booths.

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Site Address of Event: \_\_\_\_\_

Submit a site plan showing the general layout of the event indicating location of the following:

1. Body Art Booths
2. Commercial handwashing station for practitioner use
3. Water supply
4. Toilet and Hand Washing Facilities
5. Trash Disposal Containers (waster receptacles for the public and commercial waste bin)
6. Location of Decontamination/Sanitation areas (quantity)
7. Back-up Supplies

Imperial County Public Health Department, Division of Environmental Health  
 797 Main Street, Suite B, El Centro CA 92243  
 Phone: (442) 265-1888 Fax: (442) 265-1903  
[www.icphd.org](http://www.icphd.org)