

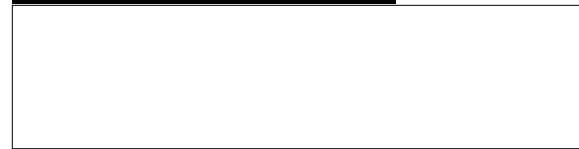
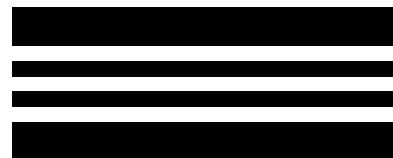


Body Art, Body Piercing, and Tattoo Shop, Mobile Unit, or Event Location Application

You can use this form to apply for a body art, body piercing, and tattoo shop mobile unit or event location. Send this completed form and a check or money order, payable to Department of Licensing, to:

Tattoo Program
Department of Licensing
PO Box 3856
Seattle, WA 98124-3856

Questions? Call (360) 664-6660



We cannot issue your license if your application is incomplete.

What you will need to complete this application:

- UBI number from Business Licensing Service (bls.dor.wa.gov/file.aspx)
- Social Security number
- Insurance policy information

Check all that apply:

- Original application for shop or mobile unit—**\$300 per location**
- Renewal application for shop or mobile unit—**\$300 per location**
- Late renewal and penalty application for shop or mobile unit—**\$400 per location**
- Reinstatement of cancelled license for shop or mobile unit—**\$300 per location**
(if you have not renewed within one year of expiration date, your license has been cancelled)
- Add location for shop or mobile unit—**\$300 per location**
- Change location for shop or mobile unit—No fee
- Duplicate license—**\$50 per license**
- Event application—**\$300 per location**
Event dates: _____ to _____ Name/Description of location: _____

Applicant information—If you are applying as a corporation or LLC, do not complete this section.

PRINT or TYPE Name (<i>Last, First, Middle</i>)		Artist operator license number
(Area code) Home telephone number	Date of birth (<i>mm/dd/yyyy</i>)	Social Security number required*

*All applicants are required by federal and state law to provide their Social Security number (SSN) for use in child support enforcement programs (42 U.S.C. 666(a)(13) and RCW 74.20A.320). It may also be used for education loan repayment programs and identification of records with similar names. Submission of your SSN is mandatory; failure to submit it may result in denial of your application.

Company information

Business name or artist shop name			
Business mailing address			
City	State	ZIP code	County
Email			
Artist shop physical address or event location address			
City	State	ZIP code	County
(Area code) Business telephone number	UBI number required		
Type of business <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC			

