



OFFICE OF THE CITY CLERK

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cityinfo@oneonta.ny.us

Application for a **Tattoo Parlor License** in accordance with the provisions of Chapter 264 of the Code of the City of Oneonta, New York.

Please Note: Applicant must submit proof of inoculation and such boosters that may be necessary to provide protection against the Hepatitis B virus.

Name of Applicant: _____ Date of Birth: _____

Address of Applicant: _____

Phone: _____ Fax: _____ Email: _____

Location of premises at which tattooing will be conducted: _____

Type of piercing equipment to be used: _____

Professional training and qualifications of applicant: _____

Applicable certifications issued from appropriate state and federal agencies: _____

Has applicant ever been convicted of a felony or misdemeanor? _____ If yes, provide details below:

Please list all employees performing tattooing under this license and include proof of inoculation and such boosters that may be necessary to provide protection against the Hepatitis B virus (use additional page if necessary):

Name of Employee	Date of Birth	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(over)

Application must be accompanied with proof of General Liability Insurance for the tattooing establishment in the minimum amount of \$100,000.00.

Date of Application: _____ Signature of Applicant: _____

Applicant must submit two photographs of the applicant taken within 30 days prior to the Date of Application.

Applicant must complete the Release of Records form and return it with this application.

FOR CLERK'S OFFICE USE ONLY

Non-Refundable Fee of \$125.00 accepted by Clerk's Office personnel on _____ Initials: _____

Approved: ___ Disapproved: ___ Clerk/Deputy Clerk Signature: _____

Date of Approval: _____ License # Assigned: _____

Form Revised: September 2017