

1. APPLICATION TYPE (please tick)					
<input type="checkbox"/>	Plan assessment/design requirements (complete parts A, B, C, F and G)				
<input type="checkbox"/>	New licence (complete parts A, B, C, F and G)				
<input type="checkbox"/>	Amendment to licence (complete parts A, D, F and G).	Existing licence number			
<input type="checkbox"/>	Transfer of licence (complete parts A, B, E, F and G).	Existing licence number			
<input type="checkbox"/>	Replacement of licence (complete parts B and G).	Existing licence number			
PART A - PREMISES' DETAILS					
2. PREMISES' DETAILS (use official address of premises location)					
Property address					
Suburb		State/Territory		Postcode	
3. REAL PROPERTY DESCRIPTION					
Lot		Plan		Lot	
4. DEVELOPMENT APPROVAL (for new permits or a change of use only)					
Is a valid Development Approval for the activity in place?					
<input type="checkbox"/>	Yes	Reference number			
<input type="checkbox"/>	Not applicable	The proposed use is exempt of self-assessable development and does not require a Development Approval.			
<input type="checkbox"/>	No	You need to determine the suitability of the site for your use. It is recommended that before you apply for a licence you contact Council's Planning and Development Department on (07) 3810 6666 to obtain further information.			

PART B							
5. APPLICANT DETAILS Individual's full name (person is applying to be the new licensee)							
Title		Given name		Surname			
Title		Given name		Surname			
Organisation's full name (organisation applying to be the new licensee)							
Business phone		Mobile		Home phone			
Email							
Business/Trading name (if applicable)							
6. ABN/ACN (mandatory)							
7. REGISTERED ADDRESS (street address only)							
Suburb				State/Territory		Postcode	
Postal address (if different from above)							
Suburb				State/Territory		Postcode	
8. CONTACT DETAILS							
Title		Given name		Surname			
Business phone		Mobile		Home phone			
Email							
9. AGENT OR CONSULTANT (details of person making application on behalf of the operator)							
Company				Contact name			
Address							
Suburb				State/Territory		Postcode	
Business phone		Mobile		Home phone			
Email							
PART C							
10. ACTIVITY CATEGORY (licence specific details)							
<input type="checkbox"/>	Tattooing	<input type="checkbox"/>	Body piercing	<input type="checkbox"/>	Scarring or cutting	<input type="checkbox"/>	Implanting natural or synthetic substances
11. MOBILE PREMISES (only complete if your application is for a mobile activity)							
Registration number	Make		Model		Colour		
12. INFECTION CONTROL QUALIFICATION							
Do all persons providing a Higher Risk Personal Appearance Service have the required Infection Control Qualifications?							
<input type="checkbox"/>	Yes	Attach copies of the Statement of Attainment issued by an accredited training provider for all persons providing this service.					
<input type="checkbox"/>	No	You are not able to provide a Higher Risk Personal Appearance Service.					

PART D			
13. AMENDMENT/S TO CURRENT LICENCE OR FOR A REPLACEMENT LICENCE (give details of proposed amendments)			
PART E			
14. TRANSFER OF LICENCE (the current licensee MUST sign this section)			
Note: if the existing premises has been modified without Council approval the licence cannot be transferred.			
Current licensee name (individual or organisation)			
Current licensee name (individual or organisation)			
Name of signatory (if applicant is an organisation)			
Position (Proprietor, Director, Manager)			
Signature		Date	□□ / □□ / □□□□
Signature		Date	□□ / □□ / □□□□
PART F			
15. APPLICANT SUITABILITY STATEMENT, DECLARATION AND SIGNATURE			
Have you ever been convicted or found guilty of an indictable offence? If you answered 'YES' give details in an attachment.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted or found guilty of an offence against the <i>Public Health (Infection Control for Personal Appearance Services) Act 2003</i> , the <i>Health Act 1937</i> or a corresponding Australian or foreign law? If you answered 'YES' give details in an attachment.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had a licence, or licence and registration under the <i>Public Health (Infection Control for Personal Appearance Services) Act 2003</i> , the <i>Health Act 1937</i> or a corresponding Australian or foreign law, cancelled, suspended or refused? If you answered 'YES' give details in an attachment.			<input type="checkbox"/> Yes <input type="checkbox"/> No
I understand that the information provided in and with this application may be disclosed publicly under the <i>Freedom of Information Act 1992</i> and the <i>Evidence Act 1977</i> .			
I am aware that it is an offence to knowingly provide false or misleading information.			
I am aware that I must ensure that any person providing a Higher Risk Personal Appearance Service must have the required Infection Control Qualifications.			
Licensee name (individual or organisation)			
Licensee name (individual or organisation)			
Name of signatory (if applicant is an organisation)			
Position (Proprietor, Director, Manager)			
Signature		Date	□□ / □□ / □□□□
Signature		Date	□□ / □□ / □□□□

PART G**16. COMPLETION CHECKLIST** (required with this application)

Failure to supply completed / required documentation will mean your application is unable to be assessed

1. Completed and signed application form	<input type="checkbox"/>
2. Correct fee paid or enclosed	<input type="checkbox"/>
3. Attached two sets of plans to scale – maximum A3	<input type="checkbox"/>
4. Attached copies of Infection Control Qualifications	<input type="checkbox"/>
5. Attached documents relating to suitability statements required if answering 'YES' to questions in Part F	<input type="checkbox"/>
6. Development assessment – if you ticked 'YES' or 'NOT APPLICABLE' to question 4, you do not need to lodge a Development Approval under the City Plan	<input type="checkbox"/>

Note: where your proposal involved new or altered structures, etc. you may require Building Approval, Plumbing Approval etc. It is your responsibility to ensure you obtain all relevant approvals. A licence under the *Public Health (Infection Control for Personal Appearance Services) Act 2003* does NOT constitute approval of other aspects of your operation.

PAYMENT OPTIONSFor fees and charges please refer to ipswich.qld.gov.au/feesandcharges

Credit Card type	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard
Card number	<input type="text"/>	<input type="text"/>
Expiry date	<input type="text"/>	<input type="text"/>
Cardholder name	<input type="text"/>	
Cardholder signature	<input type="text"/>	Date <input type="text"/>
Amount authorised	\$ <input type="text"/>	

Cheque (make payable to Ipswich City Council), cash, money order or credit card

LODGEMENT Please lodge your completed application form to

In person	Post to	Email
Ipswich City Council Customer Service Centre 143 Brisbane Street IPSWICH (top of the Ipswich City Mall)	Ipswich City Council PO Box 191 IPSWICH QLD 4305	council@ipswich.qld.gov.au

INTERNAL USE ONLY

Prepayment allocation number	<input type="text"/>		
Amount paid	\$ <input type="text"/>	Amount due	\$ <input type="text"/>
Receipt number	<input type="text"/>	Date paid	<input type="text"/>

Personal Appearance Services Licence Application Guidelines

Notes in relation to specific fields on the application

For all fields, if the space is insufficient please provide the required information in a clearly marked attachment.

1. Application type

As this form can be used for several different application types in relation to Higher Risk Personal Appearance Services, you must determine the purpose of your application. This also determines the fee payable for the application.

- **Plan assessment/design requirements** only where you need advice on the suitability or the requirements for the design of the premises, but you are not ready to operate the Personal Appearance Service within 60 days. A licence will not be issued for this type of application.
- **New licence** where premises have not previously been approved for this purpose, or where a previous approval has lapsed. You would also select New licence if you take over a business and plan to significantly alter the premises or operation.
- **Amendment to licence** if you already hold the licence and intend on making significant alternations to the operation, e.g. changing the processes or services.
- **Transfer of licence** only where you are taking over an existing licence. The premises must have a current licence, no changes to the operation must have been made and you must obtain the current licence holder's written consent.
- **Replacement of licence** when you require a new licence certificate.

PART A

2. Premises' details

You must use the official address of the location where the activity will be carried out, and include any unit number if applicable. If you are unsure of the official (rateable) address, please confirm by contacting the landowner or alternatively phone Council on (07) 3810 6666.

3. Real property description

This is the real property description (RPD) i.e. *the lot and plan*, of the parcel of land. List all applicable lots, e.g. *Lots 1-3 on Plan RPI234 or Lot 1 on RPL234 and Lot 3 on SL432 I*. The RPD is listed on the rate account, if you are unsure please confirm by contacting the landowner or alternatively phone Council on (07) 3810 6666.

4. Development Approval (this question is not applicable for a mobile activity)

If your proposal involves a change of the use of the site or construction or alteration of buildings, you may require a Development Approval. You are responsible for investigating if your proposal requires any other approvals. To determine if you need a Development Approval please phone Council on (07) 3810 6666 and ask to speak with the Planning and Development Department.

PART B

5. Applicant details

The primary applicant must be the person who will hold the permit and be legally responsible for the operation.

- Where the applicant is an individual, provide full name e.g. *Mr John Peter Smith*
- Where the applicant is a partnership of individuals, provide full name of all individuals e.g. *Mr John Peter Smith, Mr David Geoffrey Smith and Miss/Mrs/Ms Mary Jane Smith*
- Where the applicant is a corporation, provide full name of the corporation as registered e.g. *Queensland Best Pty Ltd or My Company Ltd*. **Note:** a trading name is not a legal entity and cannot be the permit holder.

6. ABN/ACN

Give your Australian Business Number or Australian Company Number here.

7. Registered address

This is the address of the registered office where you can receive legal documents. This may be the same address as the location of the activity. A post office box cannot be a registered office.

8. Contact name

You may want to nominate a contact person for the application e.g. your manager. An organisation must nominate a contact person.

9. Contact details

Give the contact details where you can be reached on a daily basis during business hours.

10. Agent or consultant

If an agent or consultant is assisting you with the application, the relevant details must be supplied. This person will receive all correspondence in relation to the application, but will not be listed as the permit holder or receive future correspondence such as renewal notices. Leave this section blank if you are not using an agent.

PART C

Licence specific details

11. Activity category

Select the appropriate type of premises that you are applying for. You are required to complete an individual application for each premises.

12. Mobile premises

Provide detail of the vehicle here if your application is for a mobile premises.

13. Infection Control Qualification

Since 1 July 2005, only persons who have obtained the required Infection Control Qualification can provide a Higher Risk Personal Appearance Service. If you are not able to provide copies of the Statement of Attainment at the time of application e.g. if you have not yet employed your staff, you will be required to provide these prior to commencing your activity.

PART D

14. Amendment/s to current licence or for a replacement of licence

This section is only applicable if you are requesting an amendment to your current licence. You need to clearly indicate the proposed amendment e.g. change to conditions, services to be provided as an alteration to approved plan. Please attach supporting documentation if relevant.

PART E

15. Transfer to licence

The current licensee must consent to the transfer of the licence to the new licensee. A transfer may only be considered where there have been no alterations to the operation.

PART F

16. Applicant suitability statement, declaration and signature

If you are supplying commercially sensitive or confidential information, please ensure you mark such information clearly. If the application is made by an organisation, the person signing this form must occupy a position that is legally entitled to make an application on behalf of the organisation.

PART G

17. Completion checklist

The checklist is used to make sure that the application is complete. Please note that where you are required to attach additional information and plans, these need to comply with requirements as outlined in the Person Appearance Services Application.

Notes in relation to plan requirements

Plans are required for any new premises where the activity has not been previously approved or where any significant alterations are proposed. Plans are not required for transfers, a replacement of a licence certificate or an amendment of licence not involving structural alterations.

- Two copies of all plans drawn to scale 1:100 or 1:200, with elevations and details not more than 1:50
- All plans not larger than A3 and clearly legible
- Floor plan showing all fittings, fixtures and equipment
- Site plan showing location of site in relationship to surrounding land uses
- Technical reports and other information such as brochures or photos can be attached as necessary to accompany the plans.

Ipswich City Council is collecting your personal information in accordance with Council's Local Laws and/or relevant legislations so that we can manage a variety of processes concerning the processing of this application. We will not disclose your personal information outside of Council unless we are required by law or you have given your consent. However, in order to perform the above functions, we may need to disclose your personal information to the Chief Executive Officer who may in turn make this information available to others in accordance with the Act or as required by law.