

Instructions and Application Form for a Philadelphia Body Art Establishment Certificate

- 1. Philadelphia Body Art Establishments approved by the Philadelphia Department of Public Health must have a valid, official Philadelphia Department of Public Health Body Art Establishment Certificate (Certificate) provided at all times.
- 2. The Certificate must be posted at the Body Art Establishment where the public can easily view it.
- 3. Certificates are valid for one (1) year, after which the establishment must apply for a renewed certificate.
- 4. An establishment can apply in person or by mail to the Philadelphia Department of Public Health, Environmental Engineering Office, 321 University Avenue, Philadelphia, PA 19104.
- 5. To apply for a Certificate or a Replacement Certificate, an establishment must submit:
 - a. A completed application for a Philadelphia Department of Public Health Body Art Establishment Certificate (available online), and
 - b. A money order for \$100 made payable to Philadelphia Health Department EHS.
 - c. For a <u>replacement certificate</u>, a money order for \$65 payable to *Philadelphia Health Department EHS*, along with a written statement of the reason why a replacement certificate is needed, must be submitted with the application.
- 6. Within a maximum of 30 business days after receipt of a complete application, the Environmental Engineering Office will mail the Philadelphia Body Art Establishment Certificate to the establishment address provided on the application submitted or notify the establishment that the Certificate is available for pick up.
- * please contact our office via email if you would like to pay the fee online

Philadelphia Department of Public Health Environmental Engineering Office 321 University Avenue – 2nd Floor Philadelphia, PA 19104 215-685-7344

https://www.phila.gov/departments/department-of-public-health/for-business-owners/body-art/

Health.BodyArt@Phila.gov



Body Art Establishment Certificate Application

Office of Environmental Engineering 321 University Avenue, 2nd Floor Philadelphia, PA 19104

CERTIFICATES ARE NOT TRANSFERABLE PLEASE PRINT CLEARLY

1. APPLICATION INFORMATION		
Type of Application:	Date:	
☐ Renewal ☐ Replacement		
2. ESTABLISHMENT INFORMATION		
Name of Establishment:		
Establishment Address (Number and Street):		
City, State, Zip:		
Establishment Phone #:	Establishment Fax #:	
Licensee:	Corporate Officer:	
Applicant Phone #:	Email Address:	
I hereby make application to the Philadelphia Department of Public Health for a certificate to operate a:		
☐ Tattoo Establishment	☐ Body Piercing Establishment	
3. HOURS OF OPERATION		
Days and times:	Check here if by	
	appointment only.	
4. ARTISTS / APPRENTICES		
Artist(s):	Apprentice(s):	
		



5. CERTIFICATE FEES	
100.00 for an annual Body Art Establishment Certificate	
65.00 for a replacement certificate for a current Body Art Establishment	
EES MUST BE PAID BEFORE A CERTIFICATE IS ISSUED. FEES ARE NON-REFUNDABLE. RETURNED PAYMENT AN DELAY CERTIFICATE ISSUANCE.	
OTE: Establishment certificates expire on December 31 st at the end of each year.	
A pre-opening visit is required for a new facility or change of ownership. An inspection by the Philadelphia Department of Public Health representative indicating the facility meets the <i>Regulations Governing Operation</i> and Conduct of Tattoo and Body Piercing Establishments is required prior to operation. Please see the Body Art Plan Review for New Body Art Establishments instructions and application form.	
I, the undersigned, certify that the information I have provided is a true and complete statement according to my knowledge and belief. I certify that I have read, understand, and agree to comply with the Regulations Governing Operation and Conduct of Tattoo and Body Piercing Establishments.	
(Applicant Signature) (Date)	

MAIL COMPLETED APPLICATION FORM AND PAYMENT TO:

Philadelphia Department of Public Health – EHS Environmental Engineering Office 321 University Avenue – 2nd Floor Philadelphia, PA 19104

- * Make money orders payable to *Philadelphia Health Department EHS*.
- * Do not mail cash and do not mail fees without a completed application form.
- * Our office does not accept personal, business, or cashier's checks.

Indicate how you would like to receive the Certificate:

Please mail the certificate to the mailing address noted on this application.
Please notify me when the certificate is ready for pick-up.