



TANNING FACILITY LICENSE APPLICATION

NEW ESTABLISHMENT		CHANGE IN OWNERSHIP	
NAME OF PREVIOUS FACILITY		NAME OF PREVIOUS OWNER	
OWNER			
NAME			
MAILING ADDRESS		CITY/STATE	ZIP CODE
EMAIL ADDRESS		TELEPHONE NUMBER	
ESTABLISHMENT			
NAME		NUMBER OF BEDS	
ADDRESS		CITY/STATE	ZIP CODE
MAILING ADDRESS		CITY/STATE	ZIP CODE
TELEPHONE NUMBER		EMAIL ADDRESS	
SCHEDULE OF LICENSE FEES			

For a tanning facility with 1-5 beds: Annual flat fee of \$75 plus \$10/bed

For a tanning facility with 5 or more beds: Annual flat fee of \$150

I have read and understand the requirements as detailed in the Western Plains Public Health's Tanning Code and agree to the terms and requirements for a Body Art Operator. I further agree to the requirements of the Code in their entirety as relates to hiring, operating and maintaining records. I understand that failure to abide by the requirements of the Code may result in legal action against the license and license holder. **Western Plains Public Health's Tanning Code as well as an online payment link can be found at: <https://www.westernplainsph.org/tanning-establishments>**

OWNER SIGNATURE	DATE
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FOR OFFICE USE ONLY			
REVIEWED BY	DATE PAID	CASH / CHECK # / CC	AMOUNT