



PROPOSED - PENDING APPROVAL
Virginia Board for Barbers and Cosmetology
GUEST TATTOOER LICENSE APPLICATION
 Fee \$75.00

THE GUEST TATTOOER LICENSE IS EFFECTIVE FOR 14 CONSECUTIVE DAYS. NO RENEWALS

A check or money order payable to the **TREASURER OF VIRGINIA**,
 or a completed [credit card insert](#) must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

A completed application must include the fee and all required documentation. Failure to answer all questions, or provide any additional documentation required will result in a delay of processing your application.

This application is required at least **30 days** prior to the first requested date provided on this application.

1. Name _____
Last First Middle Generation

2. Provide **one** of the following identification numbers.
 Social Security Number or Virginia DMV Control Number * [][] - [][] - [][][][]

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

3. Date of Birth _____
MM/DD/YYYY

4. Maiden Name or Former Surname(s) _____

5. Mailing Address* (PO Box accepted) _____

City State Zip Code

6. Street Address* (PO Box **not** accepted) Check here if Street Address is the same as the Mailing Address listed above.
PHYSICAL ADDRESS REQUIRED

City State Zip Code

* Provide a copy of your drivers license showing out of state residency.

7. Contact Numbers _____
Primary Telephone Alternate Telephone Fax

8. Email Address _____
Email address is considered a public record and will be disclosed upon request from a third party.

9. Provide the name and license number for the Salon/Parlor where the guest tattooer will be working/utilized while in the Commonwealth:

Palor/Salon Name: _____
 Virginia License No: [][][][][][][][][][] Expiration Date _____

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OFFICE USE ONLY	DATE	FEE	TRANS CODE 1020	ENTITY #	FILE #/LICENSE # 1233	ISSUE DATE
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10. Guest tattooer must be sponsored by a Virginia licensed tattooer or permanent cosmetic tattooer

Name of Sponsor _____

Virginia License No:

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 Expiration Date _____

11. Scheduled dates of operation in Virginia From: _____ To: _____
MM/DD/YYYY MM/DD/YYYY

LICENSE IS EFFECTIVE FOR 14 CONSECUTIVE DAYS PRIOR TO THE EXPIRATION DATE.

12. Do you **currently** hold or have you been **previously** licensed in Virginia as a Tattooer, Guest Tattooer, Convention Tattooer, Permanent Cosmetic Tattooer or Master Permanent Cosmetic Tattooer?

No

Yes If yes, provide the license number and expiration date below.

VA License Number

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 Expiration Date _____

13. Are you **currently** licensed to practice tattooing in any other state or jurisdiction of the United States?

No

Yes If yes, attach an original *Certification of Licensure* (dated within the last 60 days) prepared by the state board or licensing body in which you are currently licensed.

14. Do you hold an **expired** tattooing license, certification, or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?

No

Yes If yes, complete the following table.

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

15. Have you ever obtained a guest tattooer license in Virginia?

No

Yes If yes, list the date(s): _____ , _____ , _____
MM/DD/YYYY MM/DD/YYYY MM/DD/YYYY

➤ Guest tattooer may obtain up to three licenses per in the same calendar year.

16. Have you completed health education including, but not limited to blood borne disease, sterilization and aseptic techniques related to tattooing, and first aid and CPR that is acceptable to the board?

No **IF NO, YOU ARE NOT ELIGIBLE FOR LICENSURE**

Yes If yes, attach a certificate or official school transcript indicating successful completion of the training program. All health education courses must be completed from a Board approved Education provider listed on the Board's website (www.dpor.virginia.gov/Boards/BarberCosmo/) under the tab section for "Education and Exams".

17. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?

No

Yes If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

18. Have you ever had an application for licensure, certification or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing denied by any (including Virginia) local, state or national regulatory body?

No

Yes If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

19. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any felony within the last 20 years? *Any plea of nolo contendere shall be considered a conviction.*

No

Yes If yes, complete the [Criminal Conviction Reporting Form](#).

B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any misdemeanor involving moral turpitude, sexual offense, drug distribution or physical injury within the last two (2) years? *Any plea of nolo contendere shall be considered a conviction.*

No

Yes If yes, complete the [Criminal Conviction Reporting Form](#).

➤ ***Please Note:***

If you answered "yes" to having a prior **Disciplinary Action, Denial of a License** or a **Criminal Conviction** you **may not** be eligible for a temporary permit without an Administrative Hearing.

20. Guest Tattooer Signature:

By signing this application, I certify the following statements:

- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
- I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
- I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
- I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 7 of the Code of Virginia and the Virginia Board for Barbers and Cosmetology: *Tattooing Regulations*.

Signature _____ Date _____

21. Guest Tattooer Sponsor's Responsible Management:

By signing this application, I certify that the sponsor; _____ ; of the guest tattooer shall be responsible for the acts or omissions of the guest tattooer in the performance of tattooing or permanent cosmetic tattooing.

Signatures for all Responsible Management is required:

(sole proprietor, partners of a general partnership, managing partner of a limited partnership, officers/directors of an association, managers/members of a limited liability company, or officers of a corporation)

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1. Print Name _____ Title _____
Signature _____ Date _____

2. Print Name _____ Title _____
Signature _____ Date _____

3. Print Name _____ Title _____
Signature _____ Date _____

4. Print Name _____ Title _____
Signature _____ Date _____

5. Print Name _____ Title _____
Signature _____ Date _____

(Photocopy this sheet if additional signatures are needed.)

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