

Wells County Health Department
223 W. Washington St.
Bluffton, IN 46714
(260) 824-6489

Application for Tattoo/Body-Piercing Artist Permit

Permit Fee: \$100.00 (checks payable to the Wells County Health Department)

Name of Artist: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.: _____

Owner: Yes No

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Telephone No.: _____

Please Circle the services you are requesting licensure for: Tattooing Body-Piercing

I _____ (name), hereby apply for a license to practice as a (Tattoo Artist, Body-Piercing Artist or Both) in a licensed Tattoo/Body-Piercing establishment in Wells County, Indiana. I agree to strictly follow all of Wells County and the State of Indiana code(s), laws and regulations pertaining to the operation(s) of Tattoo/Body-Piercing Establishments.

Signature _____

**By Authority of
Wells County Ordinance 01-12 Tattoo/Body -Piercing Facility Ordinance**

(for office use only)

Received by: _____ Date: _____

Permit No.: _____ Date Permit Issued: _____ Initials: _____