

Use this form to apply to register hair/beauty or skin penetration business. Under [Clause 31 and 32 of Public Health Regulation 2012](#) you are required by law to provide the information marked with*.

Note: Please download this form to complete electronically

Part 1: Applicant and Site Details

1. Applicant Details

Name or Company*

ABN*

Email*

Home Phone

Mobile Phone*

Business Phone*

Residential Address*

Contact Person (if company)

2. Location and title description of the business

Note: Please indicate if the business is mobile or situated at a fixed address

Fixed Address

Unit No

House No

Street Name

Suburb

Post Code

Lot(s)

Section

Deposited Plan

Strata Plan

Mobile (If Mobile you must list all Local Government Area's you intend to operate in)

List all Local Government Area's you intend to operate in*:

Part 2: Application Details

3. Type of business*

Hairdresser

Skin Penetration

Mobile

Beauty Salon

Is the procedure carried out by a registered health professional?

Yes

No

4. Please select all procedures conducted as part of the business*

Hairdressing

Microdermabrasion

Tattooing

Manicure

Electrolysis

Scarification

Pedicure

Razor Scraping

Ear Piercing

Waxing

Lancets

Body Piercing

Beauty Therapy

Colonic Lavage

Other

Needling

Cosmetic Tattooing

Part 3: Applicant/s consent and declaration

5. Who signs the form?

- The business applicant(s) or authorised delegate.
- If signing on the owner's behalf as the owner's legal representative, you must state the nature of your legal authority and attach any available evidence (e.g. manager, power of attorney, executor, trustee, company director).

Applicant/s Declaration

As the applicant(s) or authorised delegate of

(business name), I/we

declare that all information given is true and correct

Applicant/ Authorised Delegate Signature

Name of person signing

Authority

Signature

Date

Name of person signing

Authority

Signature

Date

How to lodge this application

Lodgement Methods

Email

- Enter the address of the property and the type of application (i.e. Application to Register a Skin Penetration Business) in the subject line of the email.
- Emails are to be sent to mail@ncc.nsw.gov.au

Mail

City of Newcastle
PO Box 489
Newcastle NSW 2300

In person

At the Customer Contact Centre, located at 12 Stewart Avenue Newcastle West NSW 2302.

[City of Newcastle](#)

Phone: 02 4974 2000 Email: mail@ncc.nsw.gov.au

Address: 12 Stewart Avenue Newcastle West NSW 2302