

Nottinghamshire's Hygiene Accreditation Scheme

Application Form

In accordance with the scheme rules, proprietors have the opportunity to request assistance from the Local Authority before the initial inspection to facilitate compliance with the rating schedule.

Proprietors are encouraged to seek assistance from Local Authorities and implement practices required by the schedules in advance of the initial inspection.

For this reason, proprietors should allow sufficient time before submitting the application to the Local Authority.

PREMISES DETAILS	
Name of Premises:	
Address:	
Postcode:	
Telephone Number:	
Email:	
Activities: (Please tick all appropriate boxes)	Tattooing Semi-Permanent Make-up Cosmetic Piercing

PROPRIETOR/APPLICANT DETAILS	
Name of Proprietor:	
Position in the Business:	

DECLARATION

- I confirm that the information contained within this application is true and has been completed by the Proprietor.
- I confirm that I have read and understand the rules of the Hygiene Accreditation Scheme (including the condition of entry, membership requirements, process for re-rating and the process for withdrawal etc).
- I acknowledge that the certificate/window sticker and any similar materials remain the property of the Local Authority and must be returned upon demand.
- I consent to the Local Authority retaining this application and details on its database(s).

SIGNED:

DATE:

Please return this form by email to environmental.health@nsdc.info or to:

Environmental Health, Newark and Sherwood District Council, Castle House, Great North Road, Newark on Trent, NG24 1BY

Please write the Receipt Number when paid online:

