

CITY OF LAREDO HEALTH DEPARTMENT
2600 CEDAR - P. O. Box 2337
LAREDO, TEXAS 78044-2337
(956) 795-4904

CITY OF LAREDO
Tattoo & Body Piercing Parlor/Salon Inspection Program

Application for: Tattoo Salon, Body Piercing Studio , or Combination Salon-Studio

Establishment Name _____ Manager _____

Address _____ Address _____

City _____ City _____

Owners Driver's License No. _____ Tax Id No. _____

Owner's Phone _____ Manager's Phone _____

_____ Old Establishment _____ Change of Name

_____ New Establishment _____ Change of Ownership

STATE PERMIT INFORMATION:

STATE License No(s). _____ Expiration Date(s) _____

STATE License No(s). _____ Expiration Date(s) _____

OWNERSHIP

_____ Individual _____ Partnership _____ Corporation

Name _____ Name _____ Name _____

Address _____ Address _____ Address _____

Phone _____ Phone _____ Phone _____

TYPE OF ESTABLISHMENT

(Check Appropriate)

Tattoo Parlor/Salon Only _____ Temporary Event _____

Body Piercing Parlor/Salon Only _____ Temporary Event _____

Tattoo & Body Piercing Combined _____ Temporary Event _____

I certify that the above information is true and correct

Applicant Date