

Authorising provisions - Public Health (Infection Control for Personal Appearance Services) Act 2003

Higher risk personal appearance service (PAS) includes body piercing, tattooing, scarring or cutting the skin to make a permanent mark and implanting synthetic substances into the skin.

If you have any specific enquiries regarding how to complete this form please contact council's Environmental Health Team by phoning 07 5329 6500.

Application type	Licence no
<input type="checkbox"/> New licence - Assessment of application and licence	
<input type="checkbox"/> Amendment of licence – administration change to applicant/licence details (e.g change of business name or details)	Applicant to provide licence no.
<input type="checkbox"/> Amendment of licence with alterations to the premises – assessment of application, plans & Inspection	Applicant to provide licence no.
<input type="checkbox"/> Transfer of licence	Applicant to provide licence no.

1. Applicant details

Licence holder

Corporation, business or incorporated association Family trust is not a legal entity for a PAS licence	ABN
Registered address (for correspondence)	
Email	Phone

*Please attach current company extract (issued within the previous 30 days) from the Australian Securities & Investment Commission ASIC

Applicant name/s - provide details of all applicants, directors or management committee members

Applicant 1

Surname	Given names
Registered address (for correspondence)	
Email	Phone

Applicant 2

Surname	Given names
Registered address (for correspondence)	
Email	Phone

* Please attach an additional sheet if there are more than two applicants.

2. Business details

Trading name	Opening/settlement date	
Postal address (for licence correspondence)		
Suburb	State	Postcode
Preferred contact person		
Business phone	Alternate phone	Mobile
Email address	Fax	
Proposed opening date		
Previous trading name (new licensee only)		

Privacy

Noosa Shire Council is collecting your personal information for purposes of processing your request and undertaking associated Council functions and services. Council is authorised to collect this information in accordance with the Local Government Act 2009 and associated laws. Your personal information will only be disclosed to third parties with your consent, to meet the requirements of this application, or if required to do so by law. Council handles your personal information in accordance with the Information Privacy Act 2009 (QLD). You can find further information on how we manage personal information in Council's Privacy Policy.

3. Premises details

Fixed premises

Lot no	Plan no	Property No	Shop no	Street no
Street	Suburb			Postcode

Mobile operations

Vehicle details	Make	Model	Registration no
Garaging address	Street no	Street	
	Suburb	Postcode	

4. Development & building assessment

Where your proposal involves new or altered structures you may require planning, building, plumbing or trade waste approvals. It is your responsibility to ensure all relevant approvals are obtained prior to operating. Contact the relevant departments via council's Customer Service Centre to determine which approvals you need. If you have already obtained these approvals, please provide the council reference numbers below:

- ☐ Development approval number: _____
- ☐ Building approval (tenancy fit-out) number: _____
- ☐ Plumbing approval number: _____
- ☐ Trade waste approval number: _____

A licence under the *Public Health (Infection Control for Personal Appearance Services) Act 2003* does NOT constitute approval of other aspects of your operation.

5. Premises operation and fit-out

Copies of layout plans, sectional elevations and hydraulic plans of the premises or vehicle to be drawn to a scale of not less than 1:100 are to be submitted for approval. Such plans must satisfy the performance criteria and acceptable solutions specified in the Queensland Development Code, MP 5.2 - Higher Risk Personal Appearance Services. A copy of MP 5.2 is available [here](#)

Required details in plans to include:

- ☐ Dirty/contaminated zone with utensil cleaning sink
- ☐ Location of instrument washers and sterilisers
- ☐ Clean zone with hand wash basin
- ☐ Location of all benches, beds, equipment trolleys, storage cupboards, etc
- ☐ Finishes and materials of surfaces of floors, walls, ceiling, benches and cupboards
- ☐ Location of internal and external waste storage

You must also incorporate the operational requirements of the Infection Control Guidelines for Personal Appearance Services which is available on the [QLD Health website](#)

Required information to include:-

- ☐ Specifications of instrument washers and sterilisers
- ☐ Specifications of hand wash basin (internal dimensions, type of tap) and clean sink (internal dimensions, hot and cold water)
- ☐ Infection Control Plans (e.g. methods of sterilisation and cleaning)
- ☐ Method of waste collection and disposal for both general waste and sharps
- ☐ Storage for soiled and clean linen and proposed cleaning methods

For changes to existing premises, please provide one copy of the existing floor plan and a copy of the proposed floor plan.

6. Higher risk activity details

Activity(ies) to be conducted at your premises – please tick

- ☐ Tattooing
- ☐ Semi-permanent Make-up
- ☐ Body Piercing
- ☐ Skin implanting (beads, hair) / other
- ☐ Other skin penetration activity e.g. scarring, cutting, etc

7. Infection control personnel and qualifications

Names of all persons conducting higher risk personal appearance services at the premises:

	Name	Competency/ies achieved – see below	Statement of attainments attached
1.			<input type="checkbox"/>
2.			<input type="checkbox"/>
3.			<input type="checkbox"/>
4.			<input type="checkbox"/>

Competency standards:

- HLTIN2A – Maintain Infection Control Standards in Office Practice Settings; OR
- HLTIN402B – Maintain Infection Control in Office Practice Settings.

Please Note:

People who personally provide higher risk personal appearance services must achieve one or both of the above competency standards. These competencies are approved by the Ministerial Council for Vocational & Technical Education. Business proprietors of higher risk services must ensure people they employ or use to provide services achieve these competency standards prior to providing higher risk personal appearance services.

8. Applicant suitability statement

Have you ever been convicted or found guilty of an indictable offence, other than a spent conviction?	<input type="checkbox"/> Yes* <input type="checkbox"/> No
Have you ever held a licence under the <i>Public Health (Infection Control for Personal Appearance Services) Act 2003</i> , or a licence or registration under the <i>Health Act 1937</i> or a corresponding law that was suspended, cancelled or refused?	<input type="checkbox"/> Yes* <input type="checkbox"/> No
Have you ever been convicted or found guilty of an offence against the <i>Public Health (Infection Control for Personal Appearance Services) Act 2003</i> , the <i>Health Act 1937</i> or a corresponding Australian or foreign law?	<input type="checkbox"/> Yes* <input type="checkbox"/> No

*Provide details and circumstances for ALL applicants, including individuals, executive officers of corporations, or members of incorporated association's management committee.

9. Amendment of licence

Please attach details of your request:

Please note, depending upon the nature of your request, further information or application(s) may be required. If this is the case, you will be contacted and advised of these requirements.

10. Existing licensee details – transfer applications only – to be completed by existing licensee

I/We being the current holder(s) of the licence, the particulars of which are set out in this application form, hereby consent to the transfer of that licence to the persons described above.

Existing licence no		Date licence current to	
Trading name on licence			
Licensee name(s)			
Date of settlement	Phone	Mobile	

11. Fees – the term of licence will be until 31st July (unless cancelled or suspended)

Category - please tick	Plan assessment fee	Licence fee	Total fee
<input type="checkbox"/> New licence Assessment of Application and Plans	\$491.50	\$491.50	\$983.00
<input type="checkbox"/> Amendment of licence – administration change to applicant/licence details (e.g change of business name or details)	N/A	N/A	\$91.50
<input type="checkbox"/> Amendment of licence with alterations to the premises – assessment of application, plans & Inspection	\$352.50	N/A	\$352.50
<input type="checkbox"/> Transfer of Licence	N/A	N/A	\$150.50

A payment link will be provided and emailed to the applicant to make secure payment – council does not accept payment details by form/phone for security reasons. **Please note:** Keep your receipt from the website when making payment, as receipts cannot be reissued.

12. Checklist**Applicant****Customer
Contact**

2 copies of plans attached	<input type="checkbox"/>	<input type="checkbox"/>
Applicant suitability supporting information attached (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Relevant parts completed, signed and correct fee enclosed	<input type="checkbox"/>	<input type="checkbox"/>

13. Declaration of applicant

I/We, the applicant, declare that the above information is correct in all respects, at the time of lodgement of this application with the Noosa Council. Should any of the details given in relation to this application be changed in the future, the applicant shall advise the Council in writing prior to any such change being implemented.

I/We hereby make application to conduct a personal appearance service under the *Public Health (Infection Control for Personal Appearance Services) Act 2003* as set out in this application form and attached documentation.

I am/We are aware that I/we must ensure that any person providing a higher risk personal appearance service must have the required infection control qualifications.

	Name	Signature	Position, eg director, manager	Date
Applicant 1				
Applicant 2				