



TANNING SERVICES PERMIT Application

Permit Fee: \$200—

Application Submission Date:

| | |
|---------------------------------|-------------------------|
| Business Name: | |
| Business Address: | |
| Mailing Address (if different): | |
| Business Phone: | |
| Name and Title of Applicant: | |
| Address: | Emergency Phone (24hr): |
| E-mail Address: | |

Please answer the following questions:

| | |
|--|--|
| Do you provide each customer with a written statement of warnings about the use of tanning facilities? | |
| Do you have a knowledgeable Person In Charge? | |
| Do you provide sanitized protective eyewear? | |
| Do you provide clean and sanitary towels? | |
| Does each tanning device have a timer? | |
| What is the maximum temperature that can be reached inside the tanning device? | |
| Do you have an age restriction policy on the use of the tanning equipment? | |
| Do you have warning signs posted with white lettering and red background with information from M.G. L. C.111, Sec. 207-214 and specifically section 209? | |

Note: By obtaining this permit, I plan to follow all the requirement of M.G. L. C.111, Sec. 207-214 and specifically section 209 and the Randolph Public Health Department.

I, _____, the undersigned, attest to the accuracy of the information provided in this application.

Signature of Individual or Corporate Name