

License Application: Body Art Temporary Event

Body art: Physical body adornment including, but not limited to, tattooing and body piercing. Body art does not include procedures by medical or dental professionals.

Guest artist: Individuals who perform body art procedures temporarily for up to 30 days per year at:

- Body art businesses
- Temporary body art events

This license may be used at multiple licensed events in Minnesota.

Artists are required to have a [State of Minnesota Guest Artist License](#). Artists do not need a Minnesota Guest Artist license if they have a Minnesota Body Art Technician license.

Number and duration of events:

A body art business or organization serving as a sponsor of a temporary event can have a maximum of:

- 10 body art events per year
- 21 days of events, regardless of the number of events held

An individual who does not hold a current Minneapolis Body Art Establishment license serving as a sponsor of a temporary event can have a maximum of:

- 4 body art events per year
- 10 days of events, regardless of the number of events held

An application may not be accepted if it is submitted without time to review and secure required approvals.

If you have questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

1. Application requirements

1. Complete the application and include all the requirements listed below. Incomplete applications may be returned. This application should be completed by the Temporary Event Sponsor.
2. There is a [fee](#) for this application. There is a 50% late fee for applications received less than 14 days prior to the event. You can pay by
 - Cash:** Do not mail cash, drop off in person.
 - Check:** Make checks payable to- Minneapolis Finance Department
 - Credit Card:** Mail, drop off or email your application to businesslicenses@minneapolismn.gov. **Do not add your credit card information on this application.** We will call you to securely charge your credit card. Note: There is a 50% Late Fee if your application is submitted less than 14 days before the event.
3. **Event Checklist** (Form #1)
4. **Body Art Technicians** (Form #2)
5. Attach the following:
 - 8 ½ x 11 diagram of your set up area for the event. Indicate booths and hand sinks. A hand sink, or other approved hand washing facility, is required near each workstation. Bathroom hand sinks are not approved.
 - Client After Care Information Sheet
 - Client Release Form

2. Additional information

For reasonable accommodations or alternative formats please contact Business Licensing at 612-673-2080 or via email at businesslicenses@minneapolismn.gov. People who are deaf or hard of hearing can use a relay service to call 311 at 612-673-3000. TTY users call 612-263-6850. Para ayuda, llame al 311. Rau kev pab hu 311. Hadii aad caawimaad u baahantahay wac 311.

3. Background information

Corporate/Trade Name	Business Name (DBA)		
Contact Person	Title		
Business Address	City	State	Zip Code
Mailing Address (if different than business address)	City	State	Zip Code
MN Sales Tax ID, Social Security, or ITIN (required)	Email Address (required)		Cell Phone Number
Name of Event	Dates of Event: Times:		

Temporary Event Location and Address

List all the Body Art Temporary Event Licenses your business or organization has had in Minnesota in the past 12 months. Attach additional sheets if necessary.

Name of Event	Location/Address	Dates

4. Verification

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. MN Statute 270C.72 requires your Minnesota Tax ID Number, Social Security Number, or Individual Tax ID Number. These may be given to the Minnesota Commissioner of Revenue if requested. After we approve your license, all information except your Social Security Number is public (MN Statutes, Chapter 13).

A signature is required.

I have read and agree to the [Terms and Conditions](#) for electronic signatures, records and payment.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension or revocation of my business license.

By typing your name, you are electronically signing this application.

Signature of Applicant _____ Title _____ Date _____

Body Art Temporary Event Checklist

1. How is sterilization handled before and after the event?
 - All equipment is pre-sterilized and disposable.
 - An autoclave will be used onsite.
2. Are the following available on site?
 - Sharps container Yes No
 - Trash Receptacle Yes No
 - Safety Razors Yes No
 - Gloves Yes No
 - Ink Caps Yes No
3. What are the chairs, tables, arm rests, etc. being sanitized with?
4. What is being used for skin prep? Include both the germicidal soap and the skin antiseptic.
5. List the company you intend to use for sharps pick up.
6. What is being used for covering the tattoo when completed?
7. What type of flooring is provided? Carpet is not allowed and must be covered.
8. Documentation Required
 - a. Client Aftercare Information Sheets

These must provide the aftercare instructions and include the statement "Consult a health care professional at the first sign of infection".
 - b. Client Release Forms

The following must be included on Client Release Forms:

 - i. Procedure and client information:
 - c. Client information including name, current address, age, ID verification
 - d. Date of procedure
 - e. Design and location of tattoo
 - f. Name of Tattooist or Piercer and MN technician license number
 - ii. A checklist or place for the client to indicate if they have:
 - g. Diabetes
 - h. A history of skin diseases, skin lesions, or skin sensitivities to soap or disinfectants
 - i. History of hemophilia
 - j. History of epilepsy, seizures, fainting, or narcolepsy
 - k. Any condition that requires the client to take medications such as anticoagulants that thin the blood or interfere with blood clotting, or
 - l. Any other information that would aid the technician in the body art procedure.
 - iii. The following statements:
 - m. A tattoo should be considered permanent. It may be removed only with a surgical procedure. Removal of a tattoo or body piercing may leave scarring.
 - n. The technician shall not perform a body art procedure if the client fails to complete or sign the disclosure and authorization form and the technician may decline to perform a body art procedure if the client has any identified health conditions.
 - o. If conducting body piercing, you must include this statement: "Body piercing may leave scarring."

