



COUNTY of VENTURA

Environmental Health Division

800 South Victoria Avenue, Ventura, CA 93009-1730
Phone 805-654-2813 • vcrma.org/divisions/environmental-health

BODY ART FACILITY PLAN CHECK APPLICATION

APPLICANT: Complete the requested information

Applicant Name _____ Phone # _____ Email Address _____

Mailing Address _____

Name of Proposed Body Art Facility (DBA) _____

Address _____

Type of Body Art Facility _____ Phone # _____

Brief Description of Work

Submit the following information:

- 1a. For electronic plans use a Portable Document Format (PDF) and have a scaled size of 11 x 17 inches. Email to karen.farin@ventura.org or jeremiah.ramos@ventura.org
- 1b. For paper plans, the maximum paper size is 11 x 17 inches and must accompany this application.
- 2. A copy of your Body Art Facility Infection Prevention and Control Plan.
- 3. Facility Finish Schedule, client consent forms, aftercare forms, and client medical questionnaire forms.
- 4. Copy of the City Business License.
- 5. Application for Registration to perform Body Art (required if body art facility owner will be performing body art practitioner activities at facility).

Plan check guide and forms can be found at: <https://vcrma.org/body-art-program>

The body art facility health permit will be issued after plan approval, passing facility inspection, and payment of all fees.

I acknowledge that I am responsible for obtaining all permits and meeting all requirements needed to complete the work approved per this application.

Print Name _____ Signature of Applicant _____ Date _____

FOR OFFICE USE ONLY

Received by _____ Date _____ Amt. Received _____

Check # _____ Receipt # _____ SR # _____

Plans Submitted Electronically Plans Approved Plans Denied