



CITY OF LYNN

INSPECTIONAL SERVICES DEPARTMENT

Room 401, Lynn City Hall, Lynn, MA 01901 Tel: (781) 598-4000 Fax: (781) 477-7031

Application for Permission to Operate a Tattoo and/or Body Art Establishment

Date: _____

Name of Facility: _____

Address of Facility: _____

Telephone of Facility : _____

Owner's Name: _____

Owner's Address: _____

Owner's Telephone: _____ Owner's Email: _____

Type of Facility

Tattoo Only _____ \$300.00 per Lynn Board of Health 4/6/10

Body Art Only _____ \$300.00 per Lynn Board of Health 4/6/10

Tattoo and Body Art _____ \$500.00 per Lynn Board of Health 4/6/10

For office use only:

Date Paid: _____, Cash/Credit/Check _____, Clerk's Initials _____