

## FACT SHEET

### Applying for an Operator Licence

*Tattoo Parlours Act 2012*

***Before applying for an operator licence you must first read this fact sheet and gather all the information and documentation you will need to lodge the application.***

If you operate or intend to operate a body art tattooing business in NSW, including working from home, you need an operator licence. This licence authorises the licensee to run a body art tattooing business (whether on his or her own behalf or on behalf of another person) at the premises specified in the licence in accordance with the *Tattoo Parlours Act 2012* and the conditions, if any, on the licence.

You must not operate a body art tattooing business (whether on your own behalf or on behalf of another person) at any premises, including your own or someone else's home, unless you are authorised to do so by an operator licence.

Penalties may apply to anyone operating a body art tattooing business or performing body art tattooing procedures without a licence or permit. For more details on the penalties refer to the *Tattoo Parlours Regulation 2013*.

If you run a body art tattooing business and perform tattooing procedures as a self-employed individual at the premises on the nominated licence, you do not need a separate tattooist licence.

#### **What is a body art tattooing business?**

A body art tattooing business is a business which carries out body art tattooing procedures, whether or not the business also performs other activities or procedures.

#### **What is a body art tattooing procedure?**

A body art tattooing procedure is a tattooing procedure performed for decorative purposes, which involves the making of a permanent mark on or in the skin of a person by means of ink, dye or any other colouring agent. It does not include a cosmetic tattooing procedure.

#### **What is a cosmetic tattooing procedure?**

A cosmetic tattooing procedure is one performed:

- for the purpose of providing a customer with an eyeliner, eyebrows or any other make up effect, on a permanent basis; or
- by a medical practitioner or for a medical reason (eg. to hide, disguise or correct a medical condition or a post-operative outcome),

An operator licence is not required if the business only performs cosmetic tattooing procedures.

#### **Employment of body art tattooist**

You must not employ an individual to work as a body art tattooist unless that individual holds a tattooist licence or is a visiting overseas body art tattooist who is an authorised participant of a tattooing show.

## **Applying for an Operator Licence**

Licence application forms can be downloaded from [www.fairtrading.nsw.gov.au](http://www.fairtrading.nsw.gov.au) or completed online at [www.licence.nsw.gov.au](http://www.licence.nsw.gov.au).

An application for an operator licence can only be made by an individual who is:

- at least 18 years of age and an Australian citizen or resident;
- not a controlled member of a declared organisation under the *Crimes (Criminal Organisations Control) Act 2012*.

To apply for a licence, you must consent to having your fingerprints and palm prints taken by a police officer in order to confirm your identity.

NSW Fair Trading will carry out such investigations and inquiries in relation to an application as are considered necessary and will refer the application (together with any supporting information) to the Commissioner of Police for an investigation and determination as to whether:

- you are a fit and proper person to be granted the licence; and
- it would be contrary to the public interest for the licence to be granted.

A licence cannot be granted if:

- you are a controlled member of a declared organisation; or
- an adverse security determination has been made by the Commissioner of Police.

## **Premises manager**

An application for an operator licence may only be made by an individual.

If the application is in connection with a business that is owned, or operated by, or on behalf of a corporation, partnership or trust, the application must be made by an individual nominated by the organisation to be the business premises' manager. In such circumstances the nominated manager would be the licence holder.

A *Nomination of Premises Manager* form must be completed and attached with the application for a licence. This form is included with the operator licence application form.

## **Business premises**

You must nominate where you will operate the body art tattooing business. A separate operator licence is required for each location where a body art tattooing business is conducted.

Development consent or approval, if required, under the *Environmental Planning and Assessment Act 1979* must be obtained before starting a body art tattooing business, confirmation of consent must be provided prior to granting of a licence, but is not required on lodgement of this application. Details should be submitted within 6 weeks of lodgement of the application.

An operator licence may not be granted if a prohibition order under Part 3 of the *Public Health Act 2010* in connection with the carrying out of skin penetration procedures is in force in respect of the proposed licensed premises.

If you are not the owner of the business premises, you must supply the name and contact details (telephone number and address) of the owner/s.

## **Particulars of applicant**

An applicant for an operator licence must specify the particulars below. These particulars must also be provided for each individual close associate (as defined below):

- full name;
- details of any former names or aliases;
- gender;
- date, town, state and country of birth;
- current residential address and postal address;
- daytime telephone number and mobile number;
- email address;
- Australian drivers licence number or photo identification card number (issued by an Australian driver licensing authority)
- Tattooist Licence number (if applicable)

An individual cannot be employed to work as a body art tattooist unless they hold a tattooist licence or a visitor permit, if visiting from overseas.

## Close associates

An application for an operator licence must also include particulars of close associates of the applicant.

A **close associate** is a person who:

- holds or will hold any relevant financial interest or relevant power in the business of the applicant and because of that interest or power is, or will be able to, exercise a significant influence over the management or operation of the business; or
- holds or will hold any relevant position in the business of the applicant that will be carried out under the licence; or
- is or will be engaged as a contractor or employed in the business of the applicant that will be carried out under the licence. All employees are therefore close associates for the purposes of the Act.

**Relevant financial interest** in relation to a business, means:

- any share in the capital of the business, or
- any entitlement to receive any income derived from the business, or to receive any other financial benefit or financial advantage from the carrying on of the business, whether the entitlement arises at law or in equity or otherwise, or
- any entitlement to receive any rent, profit or other income in connection with the use or occupation of premises on which the business is or is to be carried out (for example, an entitlement of the owner of the premises where the business is carried out, to receive rent as lessor of the premises).

A financial institution is not a close associate by reason only of having a relevant financial interest in relation to a business.

**Relevant position** means:

- the position of director, manager or secretary, or
- any other position, however designated, if it is an executive position.

**Relevant power** means any power, whether exercisable by voting or otherwise and whether exercisable alone or in association with others to:

- participate in any directorial, managerial or executive decision, or
- elect or appoint any person to any relevant position.

If the business is to be owned or operated by or on behalf of a corporation or trust, it is likely that at least some, if not all, of the directors and shareholders (in the case of a corporation) or trustees (in the case of a trust) will be close associates, as defined in the legislation. You will need to determine if this is the case and ensure that particulars of all directors, shareholders or trustees who are close associates are included with the application for a licence.

Particulars of all close associates must be included in the application for an operator licence.

### **Consent of close associates**

Each individual close associate is required to complete a *Close Associate Consent Form*, allowing the Commissioner of Police or the Director-General to conduct a National Police Check. The consent form is provided with the operator licence application form.

### **Evidence of personal identification of applicant and close associates**

Certified copies of three (3) forms of acceptable identification must be provided by the applicant **and** each of their close associates.

These forms of identification must be certified by a Justice of the Peace, Notary Public or legal practitioner and comprise of one document from List 1 and two documents from List 2 below. Identification must not be expired and must include at least one type of photographic identity document and a signature and date of birth.

#### **List 1**

- Current Australian drivers licence
  
- Current photo identification card issued by an Australian driver licensing authority

#### **List 2**

- Current passport
- Birth Certificate
- Citizenship Certificate
- Certificate of Marriage or Change of Name
- Government issued identity card
- Medicare Card and/or Private health care fund card
- Senior Citizens / Govt. concession card
- Rates notice
- Utility account (eg. electricity, gas, telephone)
- Current student identity card
- Union/Professional membership card
- Licence issued by a Government authority
- Employee identity card with photograph

The person certifying the documents must:

- Compare the original document to the copy of the document to be submitted and ensure it is identical.
- Write (or stamp) on the copy;  
"I certify this to be a true copy of the original document sighted by me".
- Sign the statement.
- Print the following details:
  - Name
  - Contact telephone number Profession or occupation
  - Date certified

In addition, a Justice of the Peace must also print their registration number and the state in which they are registered.

Your application will not be considered without the consent form declaration and identification documents from each close associate. This information can be provided to you to submit with your application or the close associates can provide it to Fair Trading directly.

### **Photo identification**

If you do not hold a NSW driver's licence or a NSW photo card, you must provide with the application two recent, colour passport size photographs of good quality. Scanned photographs cannot be accepted.

One of these photographs must be endorsed on the reverse by a Justice of the Peace, Notary Public or legal practitioner with the words "This is a true photo of (insert name)".

Your photograph must meet the following requirements otherwise your application will be returned:

- A colour photograph taken no more than six months before lodgement of this application, 45mm in height and 35mm in width.
- Plain, light coloured background with no patterns or objects visible.
- Eye glasses must be removed.
- Hats or caps must be removed.
- Headwear worn for religious purposes is acceptable, but all of your facial features must be visible, from the bottom of your chin to the top of your forehead, and both edges of your face.
- Look directly at the camera with a neutral expression and mouth closed. Your head must be straight (not tilted) and upright.
- Eyes open and clearly visible, and without hair obscuring any part of your eyes. Both edges of your face must be clearly visible.
- No smiling.
- The photo must show your head and the top of your shoulders. Your face must be centred, clear and in sharp focus with no shadows across your face or behind your head, no reflections on the face and no red eye.
- The photo must show you alone, with no other person or object visible.
- Paper surface must be 'semi gloss' photographic paper.

### **Information required in respect of close associates**

The following particulars must be provided with an application for an operator licence:

- **in the case of an individual:**
  - full name;
  - details of any former names or aliases;
  - gender;
  - date, town, state and country of birth;
  - daytime telephone number and mobile telephone number;
  - email address;
  - driver licence number;
  - residential address.
- **in the case of a corporation:**
  - name of corporation and the trading names of the corporation (if any)
  - the primary business address;
  - ACN / ARBN;
  - names of directors and shareholders/members.
- **in the case of a partnership:**
  - the trading name of the partnership (if any);
  - name of each partner (including silent partners).
- **in the case of a trust:**
  - the names of the trustee or trustees

**NOTE: The particulars required to be provided for individuals and corporations must also be provided in respect of directors, shareholders/members, partners and trustees.**

### **Licence Fee**

The fee payable for a licence is specified in Schedule 1 to the *Amendment to Tattoo Parlours Regulation 2013*. The fee consists of a processing component and a fixed component. No refund will be provided if an application is refused on the ground of an adverse security determination made by the Commissioner of Police. If an application is otherwise refused or withdrawn, only the fixed component of the fee will be refunded. The processing component will not be refunded.

## Collection of licence

If a licence is granted it must be collected from a Service NSW Service Centre (SNSW) nominated by you in your application form within 60 days. Please keep a record of which centre you nominate to collect your licence from. You will need to provide proof of identity documents acceptable to Service NSW Service Centre when collecting your licence. To find out which proof of identity documents are acceptable to Service NSW Service Centre, please visit their website at [www.services.nsw.gov.au](http://www.services.nsw.gov.au) under Proof of Identity for Individuals.

Fair Trading will write to the licensee to advise when the licence can be collected. If a licence is not collected within 60 days of notification, it will be cancelled.

## Duration of licence

A licence comes into force on the date specified on the licence and remains in force for a period of three years (unless sooner surrendered, or cancelled, or it otherwise ceases to be in force).

## Renewal of licence

Fair Trading will provide you with the necessary renewal application form approximately two months before the licence expiry date. If you do not receive the renewal application prior to this date, the onus is on you to contact Fair Trading to request another copy of the form.

## Licence conditions

A licence is granted subject to specific conditions prescribed under the Act and Regulations. However, Fair Trading may impose additional conditions on a licence and a licensee must comply with all of them.

## Online Applications

You may apply for an operator licence online at [www.licence.nsw.gov.au](http://www.licence.nsw.gov.au). Completed application forms may also be posted to Business Licensing, NSW Fair Trading or lodged over the counter at any Service NSW centre. Please note that when applying online you will still be required to forward the following documentation (where applicable) to NSW Fair Trading:

- certified copies of 3 forms of acceptable identification of the applicant
- certified copies of 3 forms of acceptable identification for each individual close associate
- completed *Nomination of Premises Manager* form
- completed *Close Associate Consent Form* for each individual close associate
- photo identification (for applicants who do not hold a NSW driver's licence or a NSW photo card).

This fact sheet must not be relied on as legal advice. For more information refer to the *Tattoo Parlours Act 2012* and Regulations. The Act and Regulations may be viewed at or downloaded from [www.legislation.nsw.gov.au](http://www.legislation.nsw.gov.au).  
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## APPLICATION FOR AN OPERATOR LICENCE *Tattoo Parlours Act 2012*

An application for an operator licence may only be made by an individual. An application made in connection with a body art tattooing business that is owned or operated by or on behalf of a corporation, partnership or trust must be made by an individual nominated by the corporation, partners or trustees to be the premises manager for the purposes of carrying on that business at the premises for which the licence is sought.

An application for a licence may **not** be made by an individual who is:

- (a) under the age of 18 years, or
- (b) not an Australian citizen or Australian resident, or
- (c) a controlled member of a declared organisation under the *Crimes (Criminal Organisations Control) Act 2012*.

A licence remains in force for a period of three years from the day on which it comes into force, unless sooner surrendered or cancelled or it otherwise ceases to be in force.

Fair Trading will carry out such investigations and inquiries in relation to your application as are considered necessary for the proper consideration of the application and will refer the application (along with any supporting information) to the Commissioner of Police for an investigation and determination as to whether:

- i) you are a fit and proper person to be granted the licence;
- ii) it would be contrary to the public interest for the licence to be granted.

National criminal record information will be exchanged between the NSW Police Force and Fair Trading for licensing purposes.

### **PART A – PAYMENT AND LODGEMENT DETAILS** (Fees are GST exempt)

**Licence fee: \$2,317** (Processing Component: \$1,704 + Fixed Component: \$613).

*Applicable from 1 July 2018 to 30 June 2019*

**Refund Policy:** No refund will be provided if an application is refused on the ground of an adverse security determination made by the Commissioner of Police. If an application is otherwise refused or withdrawn, only the fixed component of the fee will be refunded. The processing component will not be refunded.

**Method of Payment:** If lodging in person at Service NSW Service Centre, payment may be made by cheque, credit card or cash.

#### **How to Lodge this Document**

 **Apply online at:**

[www.onegov.nsw.gov.au](http://www.onegov.nsw.gov.au)

 **Service NSW Service Centre**

For your nearest Service NSW Service Centre, go to [www.service.nsw.gov.au](http://www.service.nsw.gov.au) or telephone 13 77 88.

**All payments made using a debit or credit card will incur a 0.40% surcharge.**

**Enquiries:** Monday to Friday 8:30 am to 5:00 pm Telephone: (02) 9619 8700

**Email:** [businesslicensing@finance.nsw.gov.au](mailto:businesslicensing@finance.nsw.gov.au)

USE BLOCK LETTERS WHEN COMPLETING THIS FORM

**PART B - APPLICANT DETAILS**

(An application for an operator licence may only be made by an individual)

**NOTE: If you hold a NSW Driver Licence or NSW Photo Card, your name, date of birth and residential address must be entered as shown on your licence or photo card.**

Surname:

Given Name:

Middle Name(s):

Date of Birth:

Gender:

Place of Birth:

Town:	State:	Country:
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Daytime Telephone Number:

Mobile Telephone Number:

**Email Address** to which all correspondence, including renewal applications, will be sent:

Driver's Licence Number/Photo Card Number:

State of Issue of Driver's Licence/Photo Card:

Are you known by or have you ever been known by any other names (e.g. maiden name)?

Yes (provide full details below)       No

Surname:

  

Given Name:

  

Middle Name(s):

  

Residential Address:

Street Address:		
Suburb:	State:	Postcode:

Postal Address – correspondence will only be sent to this address if no email address has been provided.

Suburb:	State:	Postcode:
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**CITIZENSHIP OR RESIDENCY STATUS**

Are you an Australian Citizen?     Yes       No

Are you an Australian Resident?     Yes       No



**PART B - APPLICANT DETAILS (continued)**

**FINGERPRINTS, PALM PRINTS AND NATIONAL POLICE CHECK**

An applicant for a licence must consent to having his or her fingerprints and palm prints taken by a police officer in order to confirm the applicant's identity.

Any fingerprints or palm prints obtained from an applicant who is granted a licence may be used by the Commissioner of Police for any purpose that the Commissioner sees fit.

**Note: Under the Act, the Director-General must refuse to determine an application for a licence if the applicant refuses to be fingerprinted and palm printed.**

If an application for a licence is withdrawn or refused, the Commissioner is to ensure that any fingerprints or palm prints that are obtained for the purpose of this licence application, and any copies of them, are destroyed as soon as is practicable after the application is withdrawn or refused.

The Commissioner of Police will also conduct a National Police Check against an applicant for an Operator licence.

I consent to having my fingerprints and palm prints taken by a police officer in order to confirm my identity.

Yes  No

I hereby consent to and do request Australian Police agencies to release, to the NSW Police Force, information held by any of them regarding any convictions, findings of guilt (either with or without conviction) and any matters still outstanding against me and any other matters deemed relevant that are recorded against me, whether in my current name or a previous name.

Yes  No

*Please note that if you answered "No" to either of the above questions, your application will be refused*

**PROOF OF IDENTITY DOCUMENTS**

You are required to attach to this application **certified copies** of three (3) acceptable forms of personal identification. You must provide one (1) document from List 1 and two (2) documents from List 2. These forms of personal identification may only be certified by a Justice of the Peace, Notary Public or legal practitioner.

The person certifying the documents must:

- Compare the original document to the copy of the document to be submitted and ensure it is identical.
- Write (or stamp) on the copy "I certify this to be a true copy of the original document sighted by me".
- Sign the statement.
- Print the following details: name; contact telephone number; profession or occupation and; date certified

In addition, a Justice of the Peace must also print their registration number and the state in which they are registered.

**Acceptable forms of identification**

The three certified copies of forms of personal identification are to comprise one document from List 1 and two documents from List 2. Identification must not be expired and must include at least one type of photographic identity document and a signature and date of birth.

**List 1**

- Current Australian driver licence
- Current photo identification card issued by an Australian driver licensing authority

**List 2**

- Current passport
- Birth Certificate
- Citizenship Certificate
- Certificate of Marriage or Change of Name
- Government issued identity card
- Medicare Card and/or Private health care fund card
- Senior Citizens / Govt. concession card
- Rates notice
- Utility account (eg. electricity, gas, telephone)
- Current student identity card
- Union/Professional membership card
- Licence issued by a Government authority
- Employee identity card with photograph

**USE BLOCK LETTERS WHEN COMPLETING THIS FORM**

**NOTE:** NSW Police will write to you asking you to make an appointment to attend a police station for fingerprinting and palm printing.

When you attend your nominated police station to have your prints taken you must take with you the **original** proof of identity documents that you have provided in support of this application for verification by a police officer for the purpose of confirming your identity. Copies of these documents will not be accepted.

**PART C – PHOTOGRAPHS (If applicable)**

If you do not hold a NSW driver's licence or a NSW photo card, you must provide with this application two recent, colour passport size photographs of good quality. See below for detailed photograph requirements. Scanned photographs cannot be accepted.

One of these photographs must be endorsed on the reverse by a Justice of the Peace, Notary Public or legal practitioner with the words "This is a true photo of (insert name)".

**Photograph Requirements**

Your photograph must meet the following requirements otherwise your application will be returned:

- A colour photograph taken no more than six months before lodgement of this application, 45mm in height and 35mm in width.
- Plain, light coloured background with no patterns or objects visible.
- Eye glasses must be removed.
- Hats or caps must be removed.
- Headwear worn for religious purposes is acceptable, but all of your facial features must be visible, from the bottom of your chin to the top of your forehead, and both edges of your face.
- Look directly at the camera with a neutral expression and mouth closed. Your head must be straight (not tilted) and upright.
- Eyes open and clearly visible, and without hair obscuring any part of your eyes. Both edges of your face must be clearly visible.
- No smiling.
- The photo must show your head and the top of your shoulders. Your face must be centred, clear and in sharp focus with no shadows across your face or behind your head, no reflections on the face and no red eye.
- The photo must show you alone, with no other person or object visible.
- Paper surface must be 'semi gloss' photographic paper.

**PART D – OWNERSHIP DETAILS AND NOMINATION OF PREMISES MANAGER**

An application for an operator licence in connection with a body art tattooing business that is owned or operated by or on behalf of a corporation, partnership or trust must be made by an individual nominated by the corporation, partners or trustees to be the premises manager for the purposes of carrying on that business at the premises for which the licence is sought. The nominated premises manager must complete this application form.

Will you be carrying on a body art tattooing business on behalf of:

- |               |  |                             |
|---------------|--|-----------------------------|
| a corporation | <input type="checkbox"/> Yes (Go to Part E and continue to Part H) | <input type="checkbox"/> No |
| a trust       | <input type="checkbox"/> Yes (Go to Part F and continue to Part H) | <input type="checkbox"/> No |
| a partnership | <input type="checkbox"/> Yes (Go to Part G and continue to Part H) | <input type="checkbox"/> No |
| yourself      | <input type="checkbox"/> Yes (Go to Part H)                        | <input type="checkbox"/> No |

**If you will be conducting the business on behalf of a corporation, partnership or trust** you must also attach a completed “*Nomination of Premises Manager*” form, which is attached to this application.

**PART E – OWNERSHIP DETAILS - CORPORATION**

Complete this part if the application is in connection with a body art tattooing business that is owned or operated by or on behalf of a corporation.

Corporation Name:

Trading Name:

ACN or ARBN:

Primary Business Address:

Email Address (if any):

Web Address (if any):

Telephone Number:

**PART F – OWNERSHIP DETAILS - TRUST**

Complete this part if the application is in connection with a body art tattooing business that is owned or operated by or on behalf of a trust.

Trust Name:

ABN:

Primary Business Address:

Email Address (if any):

Web Address (if any):

Telephone Number:

**PART G – OWNERSHIP DETAILS - PARTNERSHIP**

Complete this part if the application is in connection with a body art tattooing business that is owned or operated by or on behalf of a partnership.

Trading Name of Partnership (if any):

Nature of Association:

**Details of the partners are to be provided on the next page.  
If there are more than two partners, you will need to attach additional sheets showing  
details of the third and any subsequent partners.**

**PART G – OWNERSHIP DETAILS – PARTNERSHIP (continued)**

Complete this part if the application is in connection with a body art tattooing business that is owned or operated by or on behalf of a partnership.

**Partner 1**

Surname:

Given Name:

Middle Name(s):

Date of Birth:

Gender:

Place of Birth:

Town:	State:	Country:
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Daytime Telephone Number:

Mobile Number:

Email Address:

Driver's Licence Number/Photo Card Number:

State of Issue of Driver's Licence/Photo Card:

Is this person known by or have they ever been known by any other names (eg. maiden name)?

- Yes (provide full details below)  No

Surname:

  

Given Name:

  

Middle Name(s):

  

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Postal Address (if different from the above):

Suburb:

State:

Postcode:

**PART G – OWNERSHIP DETAILS – PARTNERSHIP (continued)**

**Partner 2**

Surname:

Given Name:

Middle Name(s):

Date of Birth:

Gender:

Place of Birth:

Town:	State:	Country:
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Daytime Telephone Number:

Mobile Number:

Email Address:

Driver's Licence Number/Photo Card Number:

State of Issue of Driver's Licence/Photo Card:

Is this person known by or have they ever been known by any other names (eg. maiden name)?

Yes (provide full details below)

No

Surname:

  

Given Name:

  

Middle Name(s):

  

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Suburb:	State:	Postcode:
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Postal Address (if different from the above):

Suburb:

State:

Postcode:

Suburb:	State:	Postcode:
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## **PART H – CLOSE ASSOCIATES**

An application for an operator licence must include particulars in respect of close associates.

On the following pages, provide details of any individuals, corporations or other entities who may be close associates.

It is important to remember that **each** individual close associate is required to complete a Close Associate Consent Form and provide certified copies of three (3) forms of approved identification. This information can either be provided to the applicant to submit with their application or the close associate can provide it to Fair Trading directly.

It is the responsibility of the applicant to ensure that all the necessary completed Close Associate forms are lodged with NSW Fair Trading. The application will not be considered without the declarations and identification documents.

A blank Close Associate Consent Form is attached to this application.

**Continued over page.**

**PART H – CLOSE ASSOCIATES (*continued*)**

If the business is to be owned or operated by or on behalf of a corporation, partnership or trust, it is likely that at least some, if not all, of the directors and shareholders (in the case of a corporation), partners (in the case of a partnership) or trustees (in the case of a trust) will be close associates as defined in the legislation. You will need to determine if this is the case and ensure that particulars of all directors, shareholders, partners, or trustees who are close associates are included with any other persons nominated as close associates in Part M of this application form.

A person or corporation is a close associate of an applicant for an operator licence under the *Tattoo Parlours Act 2012* if the person or corporation:

- (a) holds or will hold any relevant financial interest, or is or will be entitled to exercise any relevant power (whether in the person's own right or on behalf of any other person), in the business of the applicant or licensee that is or will be carried on under the authority of the licence, and by virtue of that interest or power is or will be able (in the opinion of the Commissioner) to exercise a significant influence over or with respect to the management or operation of that business, or
- (b) holds or will hold any relevant position, whether in the person's own right or on behalf of any other person, in the business of the applicant or licensee that is or will be carried on under the authority of the licence, or
- (c) is or will be engaged as a contractor or is or will be employed in the business of the applicant or licensee that is or will be carried on under the authority of the licence. Employees and contractors are defined as close associates.

A financial institution is not a close associate by reason only of having a relevant financial interest in relation to a business.

The definition of relevant financial interests and relevant powers extend to relevant financial interests and relevant powers even if those interests and powers are not payable, exercisable or otherwise enforceable as a matter of law or equity, but are nevertheless payable, exercisable or otherwise enforceable as a matter of fact.

*Relevant financial interest*, in relation to a business, means:

- any share in the capital of the business, or
- any entitlement to receive any income derived from the business, or to receive any other financial benefit or financial advantage from the carrying on of the business, whether the entitlement arises at law or in equity or otherwise, or
- any entitlement to receive any rent, profit or other income in connection with the use or occupation of premises on which the business is or is to be carried on (such as, for example, an entitlement of the owner of the premises at which the business is carried on to receive rent as lessor of the premises).

*Relevant position* means:

- the position of director, manager or secretary, or
- any other position, however designated, if it is an executive position.

*Relevant power* means any power, whether exercisable by voting or otherwise and whether exercisable alone or in association with others to:

- participate in any directorial, managerial or executive decision, or
- elect or appoint any person to any relevant position.

For a fuller explanation of the term "close associate", refer to Section 4 of the *Tattoo Parlours Act 2012*.



**PART H – CLOSE ASSOCIATES (continued)**

**DECLARATION**

**The applicant is to complete the following statement as to close associates:**

I declare that I:

- understand the meaning of "Close Associates" as defined by the *Tattoo Parlours Act 2012* and have made all reasonable inquiries to ascertain the information required to complete this statement, and
- do not have any close associates as defined by the *Tattoo Parlours Act 2012* to disclose, or
- disclose the following required information about close associates:
  - if the associate is an individual – their full name, date of birth, residential address and contact details;
  - if the associate is a proprietary company - the name and ACN of the company and the names of its directors or members of its governing body;
  - if the associate is any other kind of corporation - the name of the corporation, its ACN or ARBN (if any) and the names of the directors or members of its governing body;
  - if the associate is a partnership- the trading name of the partnership and the names of the partners (including any silent partners);
  - if the associate is a trust- the names of the trustee/s and, if a trustee is a proprietary company or other kind of corporation, the information referred to above in relation to proprietary companies and other kinds of corporations concerning its management and shareholders.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

**PART I – STATEMENT AS TO CLOSE ASSOCIATES**

Tick this box if there are no close associates other than employees and/or contractors, as disclosed in Part J.

If you did not tick the above box, show details of all your close associates in Parts K, L or M as appropriate.

**PART J – CLOSE ASSOCIATES – STAFF MEMBERS (including contractors, if any)**

Employees and staff members are defined as close associates in Section 4 of the *Tattoo Parlours Act 2012*.

Details of all staff members are to be provided below and on the next page. If there are more than two staff members you will need to attach additional sheets showing details of the third and any subsequent staff members. Each staff member will also be required to complete a *Close Associate Consent Form*.

**Staff Member 1**

Position employed as:

Tattooist Licence Number:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

**Staff Member 2**

Position employed as:

Tattooist Licence Number:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Telephone Number:

**PART K – CLOSE ASSOCIATES – OTHER INDIVIDUALS**

Details of the close associates who are individuals are to be provided below and on the following pages. If there are more than four close associates, you will need to attach additional sheets showing details of the fifth and any subsequent individuals. Each individual close associate will also be required to complete a *Close Associate Consent Form*

If you have close associates which are corporations, partnerships or trusts, you must also consider whether the individuals involved in the corporate entity, partnership or trust are also close associates under the Act. If that is the case, you must ensure that you list all of those individuals as close associates below.

**Associate 1**

Nature of Association:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

**Associate 2**

Nature of Association:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

**PART K – CLOSE ASSOCIATES – INDIVIDUALS (continued)**

**Associate 3**

Nature of Association:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

**Associate 4**

Nature of Association:

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

## CLOSE ASSOCIATE - CORPORATIONS

It is likely that some, if not all, of the directors and shareholders will also be close associates as defined in the legislation. You will need to determine if this is the case and ensure that particulars of all directors and shareholders who are close associates are included with any other persons nominated as close associates in Part K. Each individual close associate is required to complete a Close Associate Consent Form and provide certified copies of three (3) forms of acceptable identification.

### PART L – CLOSE ASSOCIATES – CORPORATIONS

Details of any close associates that are corporations are to be provided below.  
If there is more than one corporation that is a close associate, you will need to attach additional sheets showing details of the second and any subsequent corporations.

Nature of Association:

Corporation Name:

ACN or ARBN:

Date of Incorporation:

Registered Office Address:

<input type="text"/>		
Suburb:	State:	Postcode:

Email Address (if any):

Web Address (if any):

Telephone Number:

**PART L – CLOSE ASSOCIATES – CORPORATIONS (continued)**

**Directors/Shareholders/Members**

Details of all directors, shareholders or members (in the case a company limited by guarantee) are to be provided below. If there are more than two individual directors, shareholders or members, you will need to attach additional sheets showing details of the third and any subsequent individuals

**Director/Shareholder/Member 1**

Surname:  Date of Birth:

Given Name:  Middle Name(s):

Residential Address:  
Street Address:   
Suburb:  State:  Postcode:

Daytime Telephone Number:  Mobile Number:

**Director/Shareholder/Member 2**

Surname:  Date of Birth:

Given Name:  Middle Name(s):

Residential Address:  
Street Address:   
Suburb:  State:  Postcode:

Daytime Telephone Number:  Mobile Number:

***Each individual must also complete a Close Associate Consent Form and provide certified copies of three (3) forms of acceptable identification.***

## CLOSE ASSOCIATES CONSENT FORM - TRUSTS

It is likely that some, if not all, of the trustees will also be close associates as defined in the legislation. You will need to determine if this is the case and ensure that particulars of all trustees who are close associates are included with any other persons nominated as close associates in Part K. Each individual close associate is required to complete a Close Associate Consent Form and provide certified copies of three (3) forms of acceptable identification.

### PART M – CLOSE ASSOCIATES – TRUSTS

Details of any close associates that are trusts are to be provided below.

If there is more than one trust that is a close associate, you will need to attach additional sheets showing details of the second and any subsequent trusts.

Nature of Association:

Trust Name:

ABN:

Email Address (if any):

Web Address (if any):

Telephone Number:

**PART M – CLOSE ASSOCIATES – TRUSTS (continued)**

**Trustees - Individuals**

Details of all trustees, including the ACN's of trustees that are corporations, are to be provided below. If there are more than two individual trustees, you will need to attach additional sheets showing details of the third and any subsequent trustees.

**Trustees 1**

Surname:  Date of Birth:

Given Name:  Middle Name(s):

Residential Address:  
Street Address:

Suburb:  State:  Postcode:

Daytime Telephone Number:  Mobile Number:

**Trustees 2**

Surname:  Date of Birth:

Given Name:  Middle Name(s):

Residential Address:  
Street Address:

Suburb:  State:  Postcode:

Daytime Telephone Number:  Mobile Number:

***Each individual must also complete a Close Associate Consent Form and provide certified copies of three (3) forms of acceptable identification.***



USE BLOCK LETTERS WHEN COMPLETING THIS FORM

**Trustees - Corporations**

Details of all trustees, including the ACNs of trustees that are corporations, are to be provided below. A separate form will be required for each individual trustee.

Nature of Association:

Corporation Name:

ACN or ARBN:

Date of Incorporation:

Registered Office Address:

Suburb:	State:	Postcode:

Email Address (if any):

Web Address (if any):

Telephone Number:

Names of Directors/Shareholders/Members:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**PART N – CLOSE ASSOCIATES – PARTNERSHIPS**

**Details of partnerships that are close associates are to be provided below and on the next page. If there is more than one partnership that is a close associate, you will need to attach additional sheets showing details of the second and any subsequent partnerships.**

Trading Name of Partnership (if any):

Nature of Association:

**Partner 1**

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile Number:

**Partner 2**

Surname:

Date of Birth:

Given Name:

Middle Name(s):

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Daytime Telephone Number:

Mobile T Number:

**If there are more than two partners in this partnership, you will need to attach additional sheets showing details of the third and any subsequent partners. You must consider whether the individual involved in the partnership are also close associates under the Act. If so, a Close Associate Consent Form will be required for each individual.**

USE BLOCK LETTERS WHEN COMPLETING THIS FORM

**PART O: BUSINESS ADDRESS**

If a body art tattooing business is proposed to be carried on at more than one place of business, a separate operator licence will be required to be held by a person for each place of business. A separate application must be made for each place of business.

I confirm the requirements under the *Environmental Planning and Assessment Act 1979* will be satisfied within 6 weeks of lodgement in respect of the proposed licensed premises? I will notify Fair Trading when development approval is obtained.

Yes  No (If "No", the application for an Operator Licence will be refused)

Is there a prohibition order in force under Part 3 of the *Public Health Act 2010* in connection with the carrying out of skin penetration procedures in respect of the proposed licensed premises?

Yes  No (If "Yes", the application for an Operator Licence will be refused)

Is there a closure order in force under Section 28 or 29 of the *Tattoo Parlours Act 2012* in respect of the proposed licensed premises?

Yes  No

Business Address:

Street Address:		
Suburb:	State:	Postcode:

Business Name, if any:

ABN:

Telephone Number:

Is the applicant for the licence the sole owner of the above business premises?

Yes  No

If you answered "No" to the above question, the name and contact details of the owner(s) are to be shown below. (if there is insufficient space to show all owners, attach a separate sheet showing the relevant particulars)

Name(s) of Owner(s) of Premises:

Telephone Number:

Contact Name (if owner is not an individual):

Address (can be either a street address or a postal address):

Address:		
Suburb:	State:	Postcode:

**PART P – DISCLOSURE**

If you answer “Yes” to any of the questions A-I below, provide full details in the space provided. If necessary, attach an additional sheet.

**A.** Are you a controlled member of a declared organisation under the *Crimes (Criminal Organisation) Control Act 2012*?

Yes       No

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**B.** Have you had any application for any licence, certificate, registration or any other authority refused?

Yes       No

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---

**C.** If the business is owned/operated by a corporation/partnership/trust, has that entity had any application for a licence or other authority refused?

Yes       No

---

---

**D.** Have you held any licence, certificate, registration or any other authority which was cancelled for disciplinary reasons or which is suspended?

Yes       No

---

---

**E.** If the business is owned/operated by a corporation/partnership/trust, has that entity held a licence/authority which was cancelled or is suspended?

Yes       No

---

---

**F.** Are you currently being investigated which, to your knowledge, may result in disciplinary action being taken against you?

Yes       No

---

---

**PART P – DISCLOSURE (*continued*)**

**G.** If the business is owned/operated by a corporation/partnership/trust is that entity being investigated which to your knowledge may result in disciplinary action?

Yes       No

---

---

**H.** If the business is owned/operated by a corporation is that corporation subject to a winding up order or appointment of a controller or administrator?

Yes       No

---

---

**I.** Have you read the fact sheet titled *Applying for an Operator Licence*?

Yes       No

**PART Q – COLLECTION OF LICENCE**

*If a licence is granted it must be collected from the nominated Service NSW Service Centre (SNSW) registry within 60 days. Fair Trading will write to you to advise you when the licence can be collected.*

*If the licence is not collected within 60 days of notification, it will be cancelled.*

You must provide the location of the SNSW Service Centre from which you intend to collect your Licence.

A list of Service Centres, their addresses and opening hours can be obtained from the SNSW website located at: [www.services.nsw.gov.au](http://www.services.nsw.gov.au)

Enter the name of the location exactly as listed in the SNSW website eg. "St Marys" or "Wetherill Park".

It is important you keep a record of the Service centre you have nominated.

Service Centre Name:

**Note:** Your licence can only be collected from a Service Centre. You cannot nominate "agencies" or "Government Access Centres (GACs)".

**PART R - DECLARATION BY APPLICANT**

I apply for the grant of an operator licence under the *Tattoo Parlours Act 2012* and certify that the particulars specified in this application and all attachments are, to the best of my knowledge, true and correct in every detail.

I hereby consent to and do request Australian police agencies to release, to the NSW Police Force, information held by any of them regarding any convictions, findings of guilt (either with or without conviction) and any matters still outstanding against me and any other matters deemed relevant that are recorded against me, whether in my current name or a previous name.

[Please note that S.11(7) of the Act states that S.12 of the *Criminal Records Act 1991* does not apply in relation to an application for a licence].

I acknowledge and agree:

- that the NSW Police Force relies on other State and Commonwealth jurisdictions (Other Agencies) to provide information to it (Other Agency Information);
- to release the NSW Police Force from any liability arising from any errors or omissions contained in that Other Agency Information;
- to release and indemnify those Other Agencies from any actions and demands that I may have available against them arising out of the release by them to the NSW Police Force of Other Agency Information; and
- to the release of national criminal history record information held or obtained by the NSW Police Force to NSW Fair Trading for licensing and regulatory purposes.

The above acknowledgment does not alter any rights I may have under legislation.

**Statement under the *Privacy and Personal Information Protection Act 1998***

I certify that the particulars and answers given in relation to this application are correct and complete and for the purposes of the *Privacy and Personal Information Protection Act 1998*, I:

- authorise NSW Fair Trading to make any inquiries and to receive and disclose any information which is relevant to the licensee's ongoing eligibility to hold this licence;
- accept that failure to supply information required on this application may delay the processing of this application;
- have a right to seek access to and correction of information supplied;
- authorise Roads and Maritime Services (RMS) to collect and use my personal information in order to assist NSW Fair Trading with processing my application for the issue of a licence under the *Tattoo Parlours Act 2012*; and
- understand that RMS, NSW Fair Trading and the NSW Police Force may disclose my personal information to each other in connection with the processing of my application and the maintenance of complete and accurate records and that RMS will not disclose my personal information without my consent unless authorised by law.

**NOTE:** It is an offence under the *Crimes Act 1900* to make a false or misleading statement in this application.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_



## Close Associate Consent Form

### *Tattoo Parlours Act 2012*

**A SEPARATE CLOSE ASSOCIATE CONSENT FORM MUST BE COMPLETED FOR EACH CLOSE ASSOCIATE**

This form is to be completed in respect of close associates that are individuals.

An applicant for an operator licence under the *Tattoo Parlours Act 2012* must provide to NSW Fair Trading the consent of each close associate allowing the Commissioner of Police or the Director-General to conduct National Police Checks.

The definition of “close associate” is contained in Section 4 of the *Tattoo Parlours Act 2012*.

**This section is to be completed by the applicant for an operator licence**

Full Name of Applicant for Operator Licence: .....

Full Name of Close Associate: .....

Signature of Applicant for Operator Licence: ..... Date: .....

**How to Lodge this Document**

Each individual close associate is required to complete a Close Associate Consent Form, allowing the Commissioner of Police or the Director-General to conduct a National Police Check. Your licence application will not be considered without the consent form declaration and identification documents from each close associate. This information can be provided to you to submit with your application or the close associates can provide it to Fair Trading directly.

If Close Associate Consent Forms and the supporting documents are being sent to NSW Fair Trading separately from the application for an Operator licence, please ensure that they are sent to:

 **Apply online at:**

[www.onegov.msw.gov.au](http://www.onegov.msw.gov.au)

**Or**



**Service NSW Service Centre**

For the location of your nearest r Service NSW Service Centre go to [www.service.nsw.gov.au](http://www.service.nsw.gov.au) or telephone 13 32 20.

**This section is to be completed by the close associate**

Surname:

Given Name:

Middle Name(s):

Date of Birth:

Gender:

Place of Birth:

Town:	State:	Country:
-------	--------	----------

Daytime Telephone Number:

Mobile Telephone Number:

Email Address:

Driver's Licence Number/Photo Card Number:

State of Issue of Driver's Licence/Photo Card:

Are you or have you ever been known by any other names (eg: maiden name)?

Yes (provide full details below)

No

Surname:

  

Middle Name(s):

  

Given Name:

  

Residential Address:

Street Address:

Suburb:

State:

Postcode:

Postal Address (if different from the above):

Street Address:

Suburb:

State:

Postcode:

**Relationship of close associate with the applicant.**

Provide a description of your close associate relationship with the applicant eg. landlord of business premises, employee, contractor, anyone who holds relevant financial interest in the business or being a director, manager, secretary of a corporation that is a close associate. The definition of "close associate" is contained in Section 4 of the *Tattoo Parlours Act 2012*.

.....

.....

.....

.....



### **Identification of Close Associate**

You are required to provide original certified copies of three (3) acceptable forms of personal identification. You must provide one (1) document from List 1 and two (2) documents from List 2.

Identification must not be expired and must include at least one type of photographic identity document and a signature and date of birth. All copies of identification must be certified by a Justice of the Peace, Notary Public or legal practitioner as being true and correct copies of the originals.

The person certifying the documents must:

- Compare the original document to the copy of the document to be submitted and ensure it is identical.
- Write (or stamp) on the copy "I certify this to be a true copy of the original document sighted by me".
- Sign the statement.
- Print the following details:  
name; contact telephone number; profession or occupation and; date certified

In addition, a Justice of the Peace must also print their registration number and the state in which they are registered.

### **Acceptable forms of identification**

The three certified copies of forms of personal identification are to comprise one document from List 1 and two documents from List 2.

#### **List 1**

- Current Australian driver licence
- Current photo identification card issued by an Australian driver licensing authority

#### **List 2**

- Current passport
- Birth Certificate
- Citizenship Certificate
- Certificate of Marriage or Change of Name
- Government issued identity card
- Medicare Card and/or Private health care fund card
- Senior Citizens / Govt. concession card
- Rates notice
- Utility account (eg. electricity, gas, telephone)
- Current student identity card
- Union/Professional membership card
- Licence issued by a Government authority
- Employee identity card with photograph

**Consent and Certification**

I certify that the particulars specified in this form and all attachments are, to the best of my knowledge, true and correct in every detail.

I .....  
( Insert full name of close associate ) ....., hereby consent to and do request Australian Police

agencies to release to the NSW Police Force information held by any of them regarding any convictions, findings of guilt (either with or without conviction) and any matters still outstanding against me and any other matters deemed relevant that are recorded against me whether in my current name or a previous name, for the purposes of an application by the above-named applicant for an operator licence under the *Tattoo Parlours Act 2012*.

[Please note that S.11(7) of the Act states that S.12 of the *Criminal Records Act 1991* does not apply in relation to an application for a licence].

I acknowledge and agree:

- that the NSW Police Force relies on other State and Commonwealth jurisdictions (Other Agencies) to provide information to it (Other Agency Information);
- to release the NSW Police Force from any liability arising from any errors or omissions contained in that Other Agency Information;
- to release and indemnify those Other Agencies from any actions and demands that I may have available against them arising out of the release by them to the NSW Police Force of Other Agency Information; and
- to the release of national criminal history record information held or obtained by the NSW Police Force to NSW Fair Trading for licensing and regulatory purposes.

The above acknowledgment does not alter any rights I may have under legislation.

Signature of close associate: .....

Date: .....

**NOTE: It is an offence under the *Crimes Act 1900* to make a false or misleading statement in this document. The maximum penalty is imprisonment for two years or a fine of \$22,000 or both.**



Nomination of Premises Manager

Tattoo Parlours Act 2012

Complete this form to nominate a premises manager of a body art tattooing business

An application for an operator licence may only be made by an individual. If the application is in connection with a body art tattooing business that is owned or operated by or on behalf of a corporation, partnership or trust, the application must be made by an individual nominated by the corporation, partners or trustees to be the premises manager.

What is the business structure of the owner/operator of the body art tattooing business? (tick a box)

Corporation: [ ] Partnership: [ ] Trust: [ ]

Name of Each Owner/Operator:

Insert name of corporation, partner corporations .....
Individual partners or each trustee .....
Include the ACN/ARBN of any corporations .....

The owner/operator of the body art tattooing business named above hereby nominates:

..... whose date of birth is ..... as the
premises manager of the body art tattooing business at: .....
(insert address or licensed premises or proposed licensed premises)

Signature of Owner/Operator:

In the case of a corporation, a director of the corporation must sign. In the case of a partnership, each partner must sign. If a corporation is a partner, a director of each partner corporation must sign. In the case of trustees, each trustee must sign. Include the capacity of the signatory eg. director of XYZ Pty Ltd, partner or trustee.

Signature: ..... Print Name: ..... Capacity: ..... Date:.....

Signature: ..... Print Name: ..... Capacity: ..... Date:.....

Signature: ..... Print Name: ..... Capacity: ..... Date:.....

Signature: ..... Print Name: ..... Capacity: ..... Date:.....