



**Temporary Health Permit Booth Application - Body Art**  
**\*\*Booth fees apply ONLY if there are less than eleven (11) booths at the event\*\***

Type or print clearly – Incomplete applications will be denied

Event Information			
Name of Event:			
Event Location/Address:			
Event Date(s):		Event Hours:	

Shop/Applicant Information	
Shop Name:	
Shop Billing Address:	
City, State ZIP Code:	
Shop Phone Number:	
Contact Name:	
Contact Phone Number during event:	
Email Address:	

Booth & Equipment Information			
Booth Square Footage:		Time booth will be ready for inspection:	
Location of hand washing facilities:			
Disposal method of all sharps and bio-hazard waste:			
Procedure light source:			

Fees per booth	
<p align="center"><b>Application AND Fee must be received by the office at least thirty (30) calendar days <u>PRIOR</u> to the event.</b>  <b><u>ALL PERMIT FEES ARE NONREFUNDABLE – NO EXCEPTIONS.</u></b></p>	
Length of Event	Fee with thirty (30) days advance notice
1-5 Day Event	\$464.00
6-10 Day Event	\$609.00
11-15 Day Event	\$754.00
<p align="center">Make Cashier's Check or Money Order payable to:  <b>Southern Nevada Health District</b>            Personal &amp; Business Checks <b><u>NOT</u></b> accepted.            Cash, Visa &amp; Master Card accepted <b>in-person ONLY.</b></p>	

Mailed applications must be received no later than thirty (30) days prior to the event – **No Exceptions.**

Apply in-person at:  
**333 N. Rancho Dr. #450**  
**Las Vegas, NV 89106**  
**Monday – Friday 8am-4pm (except on holidays)**

The booth holder is responsible for meeting all requirements as set forth in the applicable sections of the *Southern Nevada Health District Regulations Governing the Sanitation of Body Art Establishments.*

[www.southernnevadahealthdistrict.org/body-art/regulations.php](http://www.southernnevadahealthdistrict.org/body-art/regulations.php)

I UNDERSTAND THAT FAILURE TO COMPLY WITH ALL APPLICABLE REGULATIONS MAY RESULT IN IMMEDIATE REVOCATION OF THE EVENT COORDINATOR SPECIAL EVENT HEALTH PERMIT.

Booth Holder Signature: \_\_\_\_\_

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

Mail application & payment to:  
 SNHD EH Rancho - Special Programs, P.O. Box 3902, Las Vegas, NV 89127  
 Phone (702) 759-0677 ▶ Fax (702) 759-1486 ▶ Email [bodyart@snhdmail.org](mailto:bodyart@snhdmail.org)