



## TEMPORARY TATTOO & BODY PIERCING INFORMATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION

CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202 ▪

(414) 286-2238 ▪ [license@milwaukee.gov](mailto:license@milwaukee.gov) ▪ [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

### License Period

7 days or less

### Fee

\$175

### Application

- Temporary Tattoo & Body Piercing Application (ccl-tbptemp)

### Milwaukee Code of Ordinances

Regulations relating to Tattoo & Body Piercing Establishments are established in the Milwaukee Code of Ordinances 75-23 which can be found at [www.milwaukee.gov/licenses](http://www.milwaukee.gov/licenses)

### Health Department Inspection/License Issuance

At the start of the event the Health Department will inspect your operations and, if in compliance, issue the license.

The following documentation must be available for their review.

- Standard operating procedures including infection prevention and control plan.
- Equipment list of all items to be used during a tattoo or body piercing procedure or used for sterilization.
- Sharps disposal plan.
- Copies of practitioner licenses for all artists.
- Copy of client log, consent form, aftercare instructions, and age limitation sign.
- If an autoclave for sterilization will be onsite, a copy of initial spore test results.



## TEMPORARY TATTOO & BODY PIERCING APPLICATION

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OPERATOR INFORMATION	
Legal Entity Name (sole proprietor, partnership, corporation or LLC):	Business/Trade Name:
Business Address (include city/state/zip):	Business Phone #
Agent's Name:	Agent's Date of Birth:
Agent Home Address (include city/state/zip):	Agent's Phone #
Name of Person-in-Charge at Event (if different than Agent):	Person-in-Charge Phone #:
Name(s) of all Licensed Tattoo/Body Art Practitioner(s):	
EVENT INFORMATION	
Event Name:	Estimated Total Attendance:
Event Dates and Times:	
Event Address (include city/state/zip)	
Name of Event Organizer:	Phone #
Name of Event Contact Person:	Phone #:
Services Offered (check all that apply):	
Tattoo Services	Piercing Services
<input type="checkbox"/> Tattoo <input type="checkbox"/> Tattoo Removal <input type="checkbox"/> Permanent Makeup <input type="checkbox"/> Microblading	<input type="checkbox"/> Body Piercing <input type="checkbox"/> Ear Piercing <input type="checkbox"/> Microdermals <input type="checkbox"/> Other:
Other Body Art: <input type="checkbox"/> Scarification <input type="checkbox"/> Subdermal Implants <input type="checkbox"/> Braiding <input type="checkbox"/> Branding <input type="checkbox"/> Other:	
Will an ultrasonic device for equipment cleaning be onsite? <input type="checkbox"/> Yes <input type="checkbox"/> No  Describe the hand washing method used in procedure area(s)? _____ _____	

Office Use Only			
Filed	Initials	Application #	Paid
License #	Emailed to HD		

**LOCATION**Type:  Stand  Booth  Other:Located:  Indoors  Outdoors**If Outdoors, Complete the Following:**Overhead Covering  Canvas  Wood  Other:Floor  Asphalt  Concrete  Wood  Other:Walls  Screens  Canvas  Wood  Concrete  Other:Booth supplied by:  Operator  Event Organizer  Rent from:**Provide a sketch below of the general layout of the stand/booth:****ACKNOWLEDGEMENTS & SIGNATURES**If you have not submitted payment, may we email your invoice rather than send it out by postal mail?  No  Yes

If yes, provide email address: \_\_\_\_\_

I/we understand that the booth/stands(s) must meet the requirements of the Wisconsin State Statutes and Milwaukee Code of Ordinances at the time of inspection or the Temporary Tattoo & Body Piercing License may be revoked.

I/we understand that if I/we decide not to attend the event, I/we must withdraw the application BEFORE the event starts. Otherwise, I/we will be responsible to pay the outstanding fee(s), before obtaining any other licenses/permits.

\_\_\_\_\_  
Signature of Sole Proprietor, Partner, Agent or 20% or More Shareholder of Corporation or LLC\_\_\_\_\_  
Signature of Additional Partner(s)

**File your application one month or more prior to an event to ensure timely processing and approval.  
Failure to do so may result in the assessment of additional fees.**