

**CITY OF GRAND FORKS**  
**APPLICATION FOR BODY ARTIST LICENSE**  
255 N. 4<sup>th</sup> St. Grand Forks, ND PHONE: (701) 746-2664 FAX: (701)787-3740

**Annual License Fee :**

**ARTIST**

**\$25.00**

**License #**

(City Use Only)

**Instructions: Complete the required information and submit along with the annual fee to the Finance Department.**

**Full Name:**

**Part I. General Information:**

Residence Address:

Phone:

Email:

Mailing Address: ( Check here if same as residence address)

Date of Birth:

Body Art Facility at which you will be employed:

**Grand Forks City Code Section 13-1016, Body Art Operator Professional Standards lists requirements for holding a body art license in Grand Forks.**

**These regulations include a requirement that all artists be:**

- **Certified in CPR**
- **Have completed OSHA approved Bloodborne Pathogen Training**
- **Vaccinated for Hepatitis B**

**By signing below, applicant they must be in compliance with all requirements of City Code when doing business as a Body Art Operator.**

**A copy of your license must be prominently displayed in the body art establishment.**

**If any of the information provided in this application changes during the term of the license, the applicant will notify the Finance Department and provide updated information.**

**The applicant understands that misrepresentation, false statement, or omission in this application shall be grounds for rejection of said application, or revocation or suspension of any license granted.**

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

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