



**SECTION C: WORKER COMPENSATION/DISABILITY INSURANCE INFORMATION**

This is to certify, under penalties of perjury, that the above described operation has Worker's Compensation and Disability Coverage when required by law OR that the Worker's Compensation Board has issued Form CE-200 stating that such coverage is not required.

_____ Worker's Compensation Carrier	_____ W.C. Policy #	_____ Expiration Date
_____ Disability Benefits Carrier	_____ D.B. Policy #	_____ Expiration Date
_____ Date of Form CE - 200 Exemption		

**CERTIFICATION:** To be signed by Applicant, Owner/Operator or Corporate Officer

_____ Name of person completing this application	_____ Title
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I certify that the information provided on this application is true.  
False statements on this application are punishable under Penal Law.

_____ Signature of Applicant	_____ Date
_____ Signature of Studio Owner/Operator or Corporate Officer	_____ Date

**For Office Use Only**

**Plans submitted**    **Yes**   **Date** \_\_\_\_\_    **No**    **Not Applicable**

**Plans Approved By** \_\_\_\_\_   **Date** \_\_\_\_\_

**Conditions of Approval** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Approved By</b> _____	_____	_____
Signature	Title	Date



## Schenectady County Public Health Services

### Environmental Health

107 Nott Terrace, Suite 300  
Schenectady, New York 12308-3170  
Phone: (518) 386-2818  
Fax: (518) 386-2822

## Body Art Permit Application Required Documents

According to the Schenectady County Sanitary Code Body Art – Tattoo/Body Piercing Regulations Effective April 14, 2015, documentation of the following requirements must be submitted no later than 30 days prior to intended date of operation.

- Completed application, signed and dated
- Blood Borne Pathogen, CPR/First Aid, Skin Course Certifications (Classroom Courses Only)
- Evidence of Experience – Place(s) of employment
- CE-200 Worker's Compensation Insurance Exemption Form for the year, signed and dated
- Two (2) 2"x 2" passport photos taken within 30 days of submission with the following requirements:

In color, white background  
Normal street attire  
Full front face, both ears, eyes open, neutral facial expression  
No teeth, mouth closed  
No hats or head gear  
No unusual facial expressions  
No head tilting  
No snapshots, mobile phone photos, or photo alterations of any kind  
No shadows

- Sharps container pickup / disposal contract
- New Establishments: To scale Floor Plan submission at least 30 days prior to construction \$150
- Establishments with an autoclave: Name, Make, Model and Serial Number of autoclave
- Permit Fee: Establishment \$200 Body Artist \$185 Temporary Body Artist \$100
- Please make checks payable to **Schenectady County**

Partial application requirements and passport photos that do not meet the requirements will not be accepted.

Yearly permits issued are valid from date of approval to December 31st of each year.  
Temporary permits issued are valid for one event lasting 14 days or less.

Please contact this office at (518) 386-2818 Monday through Friday from 8:30 AM to 4:30 PM with any questions.