

# BODY ART PLAN REVIEW APPLICATION



Facility Layout, Equipment  
& Operations Specifications

*Updated September 2014  
Tattoo machine icon by Eric Bergholz from The Noun Project*



COLUMBUS  
PUBLIC HEALTH

# LICENSING

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All body art businesses in the City of Columbus and Worthington are required to have a body art license (approval) issued by Columbus Public Health (CPH). If you plan to open a body art facility, remodel a facility, or change your approval status (e.g. adding a sterile room, adding piercing or tattooing) you will need to submit your request to CPH for approval. If you have any questions about whether you need to submit for plan review you may contact CPH. See the CPH guide '**Starting a Body Art Business**' for more detailed information. Go to <http://www.publichealth.columbus.gov> to access information about the CPH Body Art Program.

## LICENSED BODY ART BUSINESSES & PLUMBING PERMITS

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### WHEN IS A PLUMBING PERMIT REQUIRED?

- New work
- Renovations
- Additions
- Anytime you are cutting into and replacing or adding to parts of an existing system.

### WHO IS ALLOWED TO ACQUIRE A PLUMBING PERMIT?

- **Residential (1, 2 or 3 family)**
  - Single Family Owner/Occupant (must live at residence)
  - O.C.I.L.B. Licensed and registered (with the City of Columbus Building and Zoning Services division) contractor
- **Commercial/Multi-family**
  - O.C.I.L.B. Licensed and registered (with the City of Columbus Building and Zoning Services division) contractor

# GETTING STARTED

\*PLEASE KEEP THIS PAGE FOR YOUR REFERENCE\*

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All new body art businesses and those performing extensive alterations or remodeling must complete the plan review process. Here we will walk you through all of the necessary steps to obtain a body art approval license from Columbus Public Health.

## **Step 1: Submit Plans (at least 30 days prior to construction)**

Include the following:

- Properly completed application (contained in this document, Pages 4-7)
- Completed Application for a License to Conduct a Body Art Business
  - Attached at the end of this document
- One (1) complete set of drawings of the facility to include:
  - Floor plan, showing the general layout of the fixtures and equipment
  - The total area to be used for the business;
  - Entrances and exits;
  - Location and types of plumbing fixtures, including all water supply facilities
  - Lighting plan
- Listing of all equipment to be used, include the manufacturer and model numbers
- Written verification from the zoning authority and building department having jurisdiction that the building has been zoned and approved for business use
- Written infection prevention and control plan that includes, but is not limited to the following:
  - Decontaminating and disinfecting environmental surfaces
  - Decontaminating, packaging, sterilizing, & storing reusable equipment and instruments
  - Protecting clean instruments and sterile instruments from contamination during storage
  - Ensuring that standard precautions and aseptic techniques are utilized during all body art procedures
  - Safe handling and disposal of needles
  - Aftercare guidelines
- \$300 approval fee

## **Step 2: Plan Review Process**

- Within 30 days after plans and fee are submitted CPH will start the review.
- Plans may require additional information or changes – in this case, you will be contacted.

## **Step 3: Plan Approval Process**

- A letter will be sent informing you that your review is completed and has been approved.

## **Step 4: Construction**

- Ensure that all contractors and sub-contractors are licensed, if necessary (check with City of Columbus Building Services at 645-7314).
- Ensure that contractors obtain necessary permits through Building Services.
- Contact CPH if you have questions or need a walk through inspection during construction.

## **Step 5: Inspections**

- Obtain signatures ('sign offs') from all building inspectors before contacting CPH for an opening inspection – arrange for this inspection once approval for a **Certificate of Occupancy** (or Partial Certificate of Occupancy, if applicable) has been given.
- CPH requires a minimum of 2 business days notice to schedule an inspection. Though we will attempt to accommodate your schedule, call early to avoid scheduling conflicts and allow time for re-inspection if necessary. **Call 614-645-7005 to schedule the inspection.**
- Once the opening inspection is completed and passed by CPH, you will be able to open for business and a license will be issued.

# PLAN REVIEW APPLICATION

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## Contact Information

Body Art Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Operator (Owner): \_\_\_\_\_ Phone: \_\_\_\_\_

Contact for Plans: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address for approval letter: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

List owners with 5% or more interest in business: \_\_\_\_\_

List trained body artists: \_\_\_\_\_

## Plan Review Type

New Body Art Facility      PARCEL ID: \_\_\_\_\_

Remodel/ Extensive Alteration of Existing Body Art Facility

*\*If remodel, please describe scope briefly:*

Estimated Date Construction Will Begin: \_\_\_\_\_

Estimated Opening Date: \_\_\_\_\_

## Type of Establishment (check all that apply)

Tattoo       Piercing       Permanent Makeup

**Water Supply:**       City       Other (please specify)

**Sewage Disposal:**       Sanitary Sewer       Semi Public  
*If Semi-Public, is it approved by OEPA?*     Yes     No

### Internal use only:

Date received \_\_\_\_\_

Received by \_\_\_\_\_

Amount paid \_\_\_\_\_

AR# \_\_\_\_\_

PR# \_\_\_\_\_

IN# \_\_\_\_\_

PE Code \_\_\_\_\_

# PLAN REVIEW COMPONENTS

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The plans submitted to CPH must be legible, in English and include the following information. Lack of complete information may delay plan approval and/or the opening of your business.

**Please indicate that the following are included (√) or indicate if not applicable (N/A).**

- Properly completed application (this document)
- Application for a License to Conduct a Body Art Business
- Facility Floor Plan, drawn to scale, showing the general layout of the fixtures and equipment
- The total area to be used for the business
- Location of entrances and exits
- Location and types of plumbing fixtures, including all water supply facilities
- Lighting plan
- Listing of all equipment to be used, include the manufacturer and model numbers
- Written verification from the zoning authority that the building is zoned properly for business
- Written infection prevention and control plan that includes, but is not limited to the following:
  - Decontaminating and disinfecting environmental surfaces
  - Decontaminating, packaging, sterilizing, & storing reusable equipment and instruments
  - Protecting clean instruments and sterile instruments from contamination during storage
  - Ensuring that standard precautions and aseptic techniques are utilized during all body art procedures
  - Safe handling and disposal of needles
  - Aftercare guidelines
- \$300 approval fee

**Reminder: Please ensure all items have been marked as included (√) or not applicable (N/A).**

# EDUCATION REQUIREMENT

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The education of you and your staff is an important part of planning for a successful body art business. The Ohio Administrative Code requires that all body artists have proof of appropriate training in the art that they perform. This proof can be any records of completion of courses and seminars, written statements of attestation by individuals offering body art apprenticeships, or any other documentation acceptable by the board of health.

Body Artists must also be able to demonstrate knowledge of the principles of sterilization, and each artist performing procedures must also have records of completion of training in first aid and standard precautions for preventing transmission of blood borne and other infectious diseases.

# PLAN REVIEW SUBMISSION

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This application is complete and accurate to the best of my knowledge. I understand that incomplete plans may delay the plan approval process. **I am submitting the plans and specifications for the facility layout, equipment and operation.**

Signature of applicant: \_\_\_\_\_

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

**Submit Plans To:** Columbus Public Health  
Body Art Program – Plan Review  
240 Parsons Avenue  
Columbus, Ohio 43215

**Questions?** Phone: 614-645-7005  
Fax: 614-645-7155

# INTERIOR FINISHES

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Use the following chart to indicate all interior finishes and attach it to your plans (unless the information is already included in plans).

**This information is included in plans submitted.**

Room Name	Floors	Walls	Ceilings	Coving
<i>Example: Procedure Area</i>	<i>Quarry tile</i>	<i>Painted Drywall</i>	<i>Vinyl acoustical tile</i>	<i>Plastic Coving</i>

All surfaces must be smooth and easily cleanable. Contact CPH if you have questions regarding whether specific surfaces are approved for use in a body art operation.