



Health and Wellness
Environmental Health

Tanning Equipment
Registration form

BUSINESS NAME: \_\_\_\_\_ (PLEASE PRINT)

BUSINESS LOCATION ADDRESS: \_\_\_\_\_

EMAIL ADDRESS (if any): \_\_\_\_\_ PHONE #: \_\_\_\_\_

The email address above may be used to send registration renewal reminder information and alerts or updates to the program. Yes [ ] No [ ]

OWNER'S NAME: \_\_\_\_\_

OWNER'S MAILING ADDRESS: \_\_\_\_\_

List all tanning equipment on location at the tanning facility: (Use additional sheet if necessary)

Table with 2 columns: EQUIPMENT & NAME OF MANUFACTUER/MAKE, MODEL NAME AND NUMBER & SERIAL NUMBER. Includes 5 rows of empty space for data entry.

REGISTRATION FEE: \$100.00 (Please Note: Registration Fee is Non-Refundable)

Personal information on this form is collected under section 20 of the Public Health Act, R.S.P.E.I. 1988, Cap. P-30.1 and section 3 of the Tanning Facility Regulations made under the Public Health Act for the purpose of registration of a tanning facility and section 31(c) of the Freedom of Information and Protection of Privacy Act, R.S.P.E.I. 1988, Cap. F-15.01 as it relates directly to and is necessary for registration. If you have questions about this collection of personal information, you may contact Environmental Health at 902-368-4970 or toll free at 1-800-958-6400.

Declaration

I declare that all of the information that I have provided on this form is true, correct and complete and authorize the use of my information as indicated above.

Owner Signature: \_\_\_\_\_

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

Return form to:

Environmental Health
PO Box 2000, 2nd Floor -Sullivan Bldg.
Charlottetown, PE C1A 7N8
Ph: 902.368.4970 / Fax: 902.368.6468