



Department of
Resource Management
675 Texas Street, Suite 5500
FAIRFIELD, CALIFORNIA 94533-6341
www.solanocounty.com
707-784-6765

File # EH- _____

Body Art Mobile Plan Submittal Application

New

Remodel

Minor Alteration

Scope of Work: _____

Name of Facility

Phone Number

Facility Address

Facility Owner

Phone Number

Owner Mailing Address

Contact (architect/agent)

Phone Number

This plan submittal includes the following:

- A copy of the body art vehicle's Infection Prevention and Control Plan
- Certification by the Calif. Dept. of Housing & Community Development (HCD)
- A fixed handwash sink (9-inches wide, 9-inches long & 5-inches deep) in the procedure area with containerized liquid soap and single-use paper towels that are dispensed from a wall-mounted, touchless dispenser.
- A pressurized supply of at least five gallons of potable water (submit specification sheet)
- A waste water tank at a minimum of 1.5 times the size of the potable water tank (submit specification sheet)
- Finished schedule that indicates the type of material, color, and the surface finish for the floors, base coving, walls, and ceiling
- Name & address of company that removes & disposes of all sharps waste
- Acknowledge use of only purchased, disposable, single-use, pre-sterilized instruments
- Acknowledge a mobile body art facility shall operate within 200 feet of an accessible restroom

Construction shall not begin until appropriate approvals are obtained from the Solano County Department of Resource Management and other applicable local enforcement agencies.

I understand that failure to submit any of the above required information may delay the processing of these plans.

Signed: _____

Date: _____

Plan Check Fee \$ _____

Paid ___ yes ___ no

Receipt # _____

E.H. Specialist: _____

Date Received: _____

Date Approved: _____