



**TANNING FACILITY REGISTRATION APPLICATION**

**Return this Completed Application and Payment To:**

Georgia Department of Public Health  
 Environmental Health Section  
 2 Peachtree St. NW – 13<sup>th</sup> Floor  
 Atlanta, GA 30303  
 Or email: environmentalhealth@dph.ga.gov

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

**Facility Registration Requirements:**

- The facility registration fee (\$25 for the facility and an additional \$15 for each tanning device) is required *at the time of application*.
- The Department will not prorate the registration fee. Facilities must pay the appropriate renewal fee each year to receive a registration certificate.
- Owners must also identify each type of ultraviolet lamp used in the facility’s tanning devices. The manufacturer and model number shall be recorded on the application.
- Registration certificates will expire every year on January 1<sup>st</sup> and must be renewed annually.

**PLEASE PRINT CLEARLY OR TYPE**

Facility Name (As it appears on business license or corporate documents)	
Facility Street Address	
Facility City, State, Zip Code	
Facility County	
Facility Phone	
Facility Website	
Company Email Address	
Billing Name (owner or corporation name to be billed )	
Billing Street Address (leave blank if same as facility address)	
Billing City, State, Zip Code	

**Tanning Device(s) at the Facility:**

Check (Y/N)	Type of Device(s)	Quantity
	Tanning Beds	
	Tanning Booths	
	Other Devices	

**Total Number of Devices:** \_\_\_\_\_

Complete the table below with manufacturer and model of each type ultraviolet lamp used in the facility. Attach an additional sheet if you require more space.

Manufacturer	Model #

If needed, please include additional sheets listing lamp information.

**This application will not be accepted unless the registration payment is attached or paid online.**

**Reminder:** Payment Amount = (Total # of Device(s) x \$15/device) + \$ 25/facility

Payment Amount: \$ \_\_\_\_\_

Check/Money Order Enclosed (*Payable to GA DPH, Environmental Health; do not send cash.*)  
Check/Money Order # \_\_\_\_\_

Paid Online (*www.dph.georgia.gov/tanning*)

Mail the original, fully completed application and the facility registration fee to:  
Georgia Department of Public Health  
Environmental Health Section, 13<sup>th</sup> Floor  
Two Peachtree Street, NW - Atlanta, GA 30303  
Or email: [environmentalhealth@dph.ga.gov](mailto:environmentalhealth@dph.ga.gov)

**The undersigned hereby applies for a registration to establish, operate and/or maintain a Tanning Facility pursuant to the Georgia Health Code Title 31-38-4.1.**

SIGNED	DATE
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