



This application form **must** be completed and submitted with Toronto Public Health 30 days prior to any event. This form can be emailed to [BodySafe@toronto.ca](mailto:BodySafe@toronto.ca). Events must comply with the current Infection Prevention and Control Guidelines for Special Events Offering Personal Services and applicable sections of the Ministry of Health and Long Term Care, Infection Prevention and Control Best Practices for Personal Service Settings document, under the Health Protection and Promotion Act, RSO, 1990.

## Special Events Offering Personal Service

### Vendor's Application Form

<b>Event name:</b>		<b>Location and address of event:</b>	
<b>Start date of event</b> (e.g. Jan 1, 2015)	<b>Start date of event</b> (e.g. Jan 1, 2015)	<b>Start time of event</b> (e.g. 9:00 am)	<b>End time of event</b> (e.g. 10:00 am)

### Vendor Information

<b>Business name and address:</b>		<b>Vendor name:</b>	
<b>Business telephone eg. (416) 222-1234</b>		<b>Vendor telephone eg (416) 222-3456</b>	
<b>Fax</b>	<b>e-mail:</b>	<b>e-mail</b>	
<b>Owner's Name</b>		<b>Employee name(s) working at event:</b>	
<b>Telephone e.g. (416) 222-4567</b>		<b>1.</b>	
<b>e-mail</b>		<b>2.</b>	
<b>First time participant of a special event in Toronto?</b>	<b>Yes</b>	<b>No</b>	
<b>For Toronto Business only: Last inspection date (eg Feb 1, 2015)</b>		<b>Inspection result:</b>	
<b>Vendor Booth name (if different than business name):</b>		<b>Booth number:</b>	

### Service Information

<b>Type of services at this event (mark all that apply):</b>		<b>NO services provided to the public</b>							
<b>Tattooing</b>	<b>pedicure</b>	<b>piercing</b>	<b>micropigmentation</b>	<b>Yes</b>	<b>No</b>	<b>Recirculating?</b>	<b>Yes</b>	<b>No</b>	<b>Number of footbaths</b>
<b>Manicure</b>									
<b>With throne footbaths?</b>									
<b>Other services, please describe:</b>									
<b>Sharps, such as needles, razors will be used on-site?</b>				<b>All items that require sterilization such as needles, needle bars, jewellery, and forceps will be brought to the venue pre-packed and sterile?</b>					
<b>YES*                      No</b>				<b>YES*                      No items require sterilization at the event</b>					
<i>*If yes, An approved sharps container is required for the disposal of all sharps</i>				<i>*Sterilized items by the owner/operator at their business locations must have the date of sterilization on the package. Spore test results are required at the venue.</i>					
				<b>**There is no sterilization of equipment on-site at the venue</b>					

<b>For items purchased pre-packaged and sterile, provide the name/address/telephone number of the supplier(s)</b>	
<b>Name:</b>	<b>Address:</b>
<i>Attach a separate sheet of paper if more space is required.</i>	
<b>Telephone number eg (416) 222-4567:</b>	
<b>For items sterilized at a business location, provide the name and address of where the items were sterilized, if different from above</b>	
<b>Name:</b>	<b>Address:</b>
<b>Contact telephone eg (416) 222-5678</b>	

*Copies of the three most recent spore testing results must be on-site from the sterilizer(s)/autoclave(s) used for sterilization. Spore tests must be in English.*



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**70-90% alcohol based hand rub will be available at each booth:**    **YES**

*All personal services workers must perform hand hygiene before service delivery and as required during and after service.*

*The event organizer/coordinator is responsible to ensure there are hand wash stations and they are equipped with liquid soap in dispensers and single-use towels for all vendors and their staff. It will be the event organizer/coordinator's responsibility to maintain these stations fully equipped and in a sanitary manner at all times during the event.*

**Labelled container(s) to store and transport dirty items will be available:**    **Yes**

**Items need to be cleaned and disinfected on-site?**        **YES\***    **NO**

**If YES, an appropriate disinfectant must be available on-site.**

*Cleaning and disinfection sinks need to be conveniently located, large enough to fit the largest item and designated for the cleaning of disinfection of these items. Any exceptions must be discussed and approved by the inspector. If disinfection is necessary, soap, utility gloves, and a scrub brush may be required.*

**An ultrasonic cleaner will be used to clean instruments?**        **YES**    **NO**

*If YES, the ultrasonic cleaner must be operated in accordance to the TPH IPAC Guidelines.*

**Please note that non-compliance with TPH requirements may result in service interruption or closure. I have received and read the IPAC Guidelines for Special Events and I understand the requirements for personal services vendors at special events. The information I have provided on this application form is accurate.**

**Date (eg. Mar 1, 2015):**

**Print Name:**

**Signature (if mailing or faxing):**

To Be Completed By the Public Health Inspector

**Application approved:**        **YES**        **NO**

**Comments:**

**Date (eg Mar 1, 2015):**

**Print name:**

**Signature (electronic, if available)**

**Information contained on this form is collected under the authority of the Health Protection and Promotion Act, R.S.O. 1990, Chapter H.7. for the purpose of enforcing the Act and Regulations. For information regarding collection, contact the Associate Director of Toronto Public Health, Control of Infectious Diseases/Infection Control at 277 Victoria Street, 9th Floor, Toronto, M5B 1W2 or call 416-338-7600.**

Application forms can be sent by email to [BodySafe@toronto.ca](mailto:BodySafe@toronto.ca), by fax at 416-392-0715 or mailed to 277 Victoria Street, 9th Floor, Toronto, ON, M5B 1W2. Attention: PSS Manager. For more information call 416-338-7600

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