

Northeast District Department of Health

69 South Main Street, Unit 4, Brooklyn, CT 06234 Phone: (860) 774-7350 / Fax (860) 774-1308 / www.nddh.org

Fee: \$135.00

To: Independent Contractor -Cosmetology/Barbershops/Nail Salons

From: Northeast District Department of Health

Date: October 15, 2024

Subject: 2025 Annual Permit

The registration issued to your establishment by the Northeast District Department of Health (NDDH) will expire on December 31st and must be updated on a yearly basis. We are eager to assist you in complying with the State of Connecticut public health regulations.

Please return the following to this office by close of business Monday, December 16, 2024:

- A completed **Independent Contractor Service Application**. You may access the application forms and can make payment online at www.nddh.org/formspermits/. If you do not have computer access, you may pick up the forms and pay the application fee at our office at 69 South Main Street, Brooklyn, during regular business hours (Monday-Thursday, 8am 4pm, Fridays, 8am noon).
- Completed Emergency Contact Information Form. Please be sure to provide us with a valid e-mail address, as we will be sending permits electronically.
- The appropriate fee paid online at https://www.nddh.org/formspermits/pay-online/, brought to our office, or mailed with your application to 69 South Main Street, Unit 4, Brooklyn, CT 06234. The fee schedule, effective 7/1/24, can be found online at: https://www.nddh.org/wp-content/uploads/2024/06/NDDH Service Fees effective 070124.pdf

Upon receipt of all necessary documentation, a permit will be issued for your establishment which will be valid from January 1st through December 31, 2025.

All necessary documentation and permit fees must be received by close of business on Monday, December 16, 2024, or the establishment will be charged a late fee of \$90. In addition, a penalty fee of \$12 per NDDH business day with a maximum of \$120 shall be assessed for each business day late from January 1 through January 10, 2025, inclusive.

Annual inspections will be conducted throughout the year. A re-inspection fee of \$145 will be charged for a failed inspection.

failed inspection.	
If you have any questions, please feel free to contact us.	
As always, we look forward to working with you.	Permit Checklist ☐ Application
Sincerely,	☐ Emergency Form
The Northeast District Department of Health	☐ Permit Fee Payment

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www.nddh.org

email@nddh.org

Sanitarian Approved Initial:			
Date:			
Emailed:			

SERVICE APPLICATION - INDEPENDENT CONTRACTOR

COSME	TOLOGY	BARBER	NAIL SA	ALON [OTHE	ER:	
Independen	t Contractor	Name:					
Town:		S	tate:		Z	ip Code:	
Telephone #	#:		Billing Emai	i1 :			
Number of	Workstations	/Chairs:		Business F	Hours: _		
Department	Number of Workstations/Chairs: Business Hours: License #:						
Expiration l	Date:						
		,					
	Indep	endent Contracto	or must fill out t	his section o	f the app	lication.	
	•		•	•			
						siness:	
Establishme	ent Physical A	Address:					
Town:		Sta	ate:		_ Zip	Code:	
Mailing Ad	dress (if differen	t from physical addres	ss:				
Business Te	elephone #: _		F	ax #:			
		Establis	hment Requi	rements O	Only		
Sewage Dis	sposal: 🗏 Pı	ublic 🔲 Privat	e Date La	ast Pumped	l:		
Water Supp	E D 11						
				.==			
Independen	t Contractor's	s Signature:				Date:	
NDDH Use On							
NDDH Use On Date:	•	Check #	CC	C E-Check	Cash	Receipt #	



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69 South Main Street, Unit 4, Brooklyn, CT 06234 860-774-7350 / Fax 860-774-1308 www.nddh.org

EMERGENCY CONTACT INFORMATION

Water Interruption • Power Outage • Fire • Flood • Contamination • Natural and Man-made Disasters

There are a number of emergencies that can interrupt your establishment. To protect the public, the Northeast District Department of Health (NDDH) must be able to quickly contact decision-makers for your business/organization to provide appropriate guidance. Check our website for regular updates that impact your establishment at https://www.nddh.org.

NDDH will conduct periodic tests of our Emergency Notification Systems. You may receive messages by phone, text, fax, or email. Please complete the information below, being sure to fill all fields accurately:

Today's Date:					
Business/Org Name:					
Business Address:					
		Zip:			
Emergency Contact Name ar	nd Title:				
Cell Phone:	Fax Num	Fax Number:			
Work Phone:	Home Phone:				
Email Address:					
		ıber:			
	Home Phone:				
Is water for your business e	stablishment/organization	supplied by:			
Well	Community W	ater System			
Businesses with multip	ole locations: Please complete a	a separate form for each location.			
NDDH USE ONLY:					
Updated - EHS Database:	Excel Data Sheet:In	itials: REVISED 1			



The Northeast District Department of Health

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To: Salon/Spa, Barbershop, and Nail Salon Owners From: The Northeast District Department of Health

Date: November 8, 2022

Subject: Nail Technician

Many of you are aware of the Public Act 19-117, Sections 196 mandates the local health department to conduct an annual sanitary inspection of your business operations. As part of our efforts to comply with the state statutes, NDDH is providing informational resources for owners.

The purpose of this notification is to update you of permit changes required for all owners and operators regarding Nail Technician licensing requirements that are in effect. All information can be found online. (Links provided throughout memorandum).

State of Connecticut Provision of Public Act 19-117 https://www.cga.ct.gov/2019/act/pa/pdf/2019PA-00117-R00HB-07424-PA.pdf

Department of Public Health Statute 19a-17 https://www.cga.ct.gov/2020/sup/chap_368a.htm#sec_19a-17

No person may practice as a Nail Technician in Connecticut after January 1, 2021, without holding a license issued by the Department of Public Health.

https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/Nailtechs/Nail-Technician

The Northeast District Department of Health will only permit businesses, including nails salons, that comply with all state and local laws. Please be sure to complete licensing requirements to avoid loss of or non-renewal of permits.

License Based on an Out-of-State License

The Department may grant a license to any applicant who is licensed as a nail technician in another U.S. state, the District of Columbia or a commonwealth or territory, subject to the laws of the United States. Before applying for licensure, please familiarize yourself with the general licensing policies.

Be sure to provide NDDH with a copy of all licensing individuals with your permit application and display licenses in public view per regulations.

State of Connecticut requires all registration to be online.

Steps to Apply for CT Nail Technician, Esthetician, Eyelash Tech License

All applicants MUST register if this is a first-time application.

You can find the eLicense registration link under INITIAL APPLICATION

- 1. Select "Register" link
- 2. Next click on Initial Application
- 3. Register new account
- 4. Account Matching
- 5. Verify Email Address

APPLICATION FOR A NEW LICENSE, PERMIT OR REGISTRATION: Online applications are for new applicants ONLY. If you are seeking to reinstate or renew, please contact the appropriate agency below for further information.

To apply for a new license, permit or registration online, please follow the instructions below:

- 1. From "Online Services", select "INITIAL APPLICATION" under "Activities" to begin.
- 2. Select the appropriate application and follow instructions. Please note, not all application types are available to be completed online. Note: All applications must be reviewed and approved by the appropriate agency.
- 3. Under Appearance Enhancement Tab
- 4. Click on: Esthetician, Eyelash Technician, Nail Technician, or Combination Nail Technician, Esthetician or Eyelash Tech
- 5. Start Application Process

Website Help Link:

 $\underline{https://portal.ct.gov/-/media/DCP/pdf/Applications_Added_2017/Online-User-Id-Instructions-Oct17-2-pdf.pdf?la=en}$

ONLINE RENEWAL: To renew your license, permit or registration online,

1. select <u>"RENEWAL"</u> under **"Online Services."** Follow step-by-step renewal instruction

<u>User Id and Password Instructions</u> Fast Track Renewal Instructions

License Look up https://www.elicense.ct.gov/Lookup/LicenseLookup.aspx