

Office of Environmental Health  
Indoor Tanning Program

**TANNING OPERATOR LIST**

Registration No. \_\_\_\_\_-T-\_\_\_\_\_

This is to certify that I/we have read and thoroughly understand the following:

- Title 15 - Mississippi Department of Health, Part 14 – General Sanitation, Subpart 70 – General Sanitation Regulations, CHAPTER 6 -- REGULATIONS FOR TANNING FACILITIES;
- Manufacturer’s procedure for operation and maintenance of tanning equipment; and
- Manufacturer’s emergency procedures in case of injury

I/we are the trained operators for the facility located at:

Facility Name	
Address	
City, State ZIP	
Phone	(    )

\_\_\_\_\_  
Operator

\_\_\_\_\_  
Operator

\_\_\_\_\_  
Operator

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

Mail this form to the Office of Environmental Health at the address below.

570 East Woodrow Wilson, Suite O-300  
Jackson, Mississippi 39215

*Retain a copy for your records.*