



Laura Vlasuk
Director of Public Health

CITY OF NEWBURYPORT BOARD OF HEALTH

60 Pleasant Street
Newburyport, MA 01950

PHONE: 978-465-4410

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Public Health
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***Remote* Board of Health Meeting**
May 26, 2022 7:00pm

Please click the link below to join the meeting: <https://us02web.zoom.us/j/89118714173>

Or by phone (audio only): +1 (929) 205-6099
Meeting/Webinar ID: 891 1871 4173

Meeting Agenda:

- I. 7:00pm – Call to Order
- II. Approval of Minutes
- III. Appeal Hearing – Newburyport One Stop, 1 Kent St, Newburyport, MA
- IV. Body Art Regulation
- V. COVID-19 Update
- VI. Yankee Homecoming Fees
- VII. Director’s Report
- VIII. Next Meeting
 - a. June 23, 2022 7:00pm
- IX. Session for topics not reasonably anticipated 48 hours in advance of meeting
- X. Adjourn



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Board & Staff Present:

Dr. Robin Blair, Board Chair
Dr. Robert Slocum, Board Member
Dr. Sam Merabi, Board Member

Laura Vlasuk, Director of Public Health
Michael Lawler, Office Manager

Other Attendees:

Ron Beauregard, Director of Healthy Communities Tobacco Control Program
Leah Lynch, Beautique Salon
Lauren Kantak, Mirror Mirror Salon

***Remote* Board of Health Meeting Minutes**

April 21, 2022

I. Call to Order – 7:00pm

Meeting called to order by Dr. Blair at 7:02 pm

II. Approval of Minutes from Previous Meeting

Motion to approve minutes made by Dr. Merabi, seconded by Dr. Slocum. Motion passes 3-0.

III. General Department Update

Laura Vlasuk was introduced as the new Director of Public Health for the City of Newburyport.

IV. Appeal Hearing – Newburyport One Stop, 1 Kent Street, Newburyport, MA 01950

This agenda item was pushed to the next meeting, Thursday, May 26, 2022.

V. Body Art Regulation

Dr. Blair and Dr. Merabi gave an overview the discussion of last meeting where there was a request from two salons to do lip pigmentation.

Director Vlasuk gave the Board an overview of the updates that were done to the regulations over the past month. The updates include grammatical errors, changing from gendered pronouns to gender-neutral pronouns, and a new section on apprenticeship licensure.

Michael Lawler, Office Manager, explained that there were two key problems to tackle, one being lip pigmentation and the other being an apprenticeship license. Michael also informed the Board that both Lauren Kantak and Leah Lynch who both have Body Art facilities were on the call to answer questions the Board may have.

Leah spoke to the confusion around micropigmentation which is with the use of a machine and microblading which is a separate technique using different tools.

Dr. Merabi asked for clarification on when the date was that micropigmentation was discussed because he does not recall, he only recalled microblading being reviewed.

Lauren explained that technically their license covers microblading and micropigmentation. She currently only holds her microblading and eyebrow certification so that is the only service she provides, but if she takes the course for lips, that will then fall under the blanket of her certification so she should be able to jump into it. Lauren explained that she originally came to the Board as a formality to make sure that this was okay to do because she was under the impression from conversations with the former Director that this was an allowed procedure if the course was taken.

Leah explained that the technique and equipment of micropigmentation is the same for the eyebrow as it is for the lip. It is just moving the equipment down the face and that the same risk and exposure exists for both.

Dr. Merabi explained that the lip is made up of mucosa and not derm which is the difference in his mind and that the Board has not yet reviewed any materials related to that. Dr. Merabi also referenced one presentation that was given to the Board on areola tattooing that was given in conjunction with a plastic surgeon in the context of ancillary treatment for cancer patients. Dr. Merabi was hoping for some sort of presentation on the procedure that the Board could review. Leah stated that she was willing to do a presentation on the procedure for the Board. Lauren stated that spoke with the school that she attended, and they suggested that the Board reach out to the City of Boston to discuss their regulations if that would offer more clarity.

Dr. Merabi asked if the Board could be sent information on how far the needle is going in the lip, what is being used, and just the basics.

Lauren stated that she would make a copy of the chapter of the book they study from on lip micropigmentation and drop that off at the Health Department for review by the Board.

Dr. Slocum asked Dr. Merabi for clarification on what the current concerns were from his perspective so that he had a better understanding. Dr. Merabi stated that the Board approved everything for derm and that the lip is made up of different cells and the Board was not yet presented with information relating to the lips. Dr. Slocum also asked for clarification on what the Board's role was in this – if it was just to say that it is not a public health risk for disease transmission but also not endorsing it as a recommended procedure or anything. Dr. Merabi explained that it was more about due diligence and looking at what issues might come later so that if someone came forward with an issue and said why did the Board approve it, they had all the information.

Lauren asked the Board that since they brought up areola tattooing and that is technically dermis, if she would be covered under that with her license if she were to take the class. Dr. Merabi said that he believes that was approved so yes it would be allowed. Michael Lawler explained that he saw that in the minutes during his research that in order to do areola tattooing a sign-off was needed by the surgeon that treated the patient just saying that they were clear from risk of infection. Lauren explained that her plan would be to take both the lip and areola class and add those procedures to her service.

Leah asked for some clarification on what the Board wanted to see so she may prepare for next time. Dr. Merabi asked for bullet points of equipment, how far into the lip you are going (layer), what is single use, what is not single use, what is autoclaved, etc. Lauren explained that it is all single use except for the machine and those are wrapped in tattoo plastic. She also asked if she

should bring in her machine and single use items for the Board to see. Dr. Merabi explained that photographs should be fine and in terms of presentation, he was looking for an itemization of equipment, brief description of the procedure and how it differs from what was already approved then sent to the Board, so they have time to review it.

Dr. Blair stated that this will be continued to the next meeting.

Director Vlasuk asked before moving on to the next topic if the Board would want to take up the apprenticeship portion this month or wait until next month and do it with the lip pigmentation.

Leah spoke on this matter that this regulation was somewhat recent and was asking for grandfather status for those who had applications and be considered for licenses before the changes were made. Dr. Blair stated that his opinion would be that if they were approved for their license already than those individuals would be grandfathered in before the new regulations went into effect. Director Vlasuk agreed that the five that were already licensed should be grandfathered in, but if the Board voted in those regulations that those should take effect immediately.

Dr. Blair asked if the changes are mostly just housekeeping. Director Vlasuk explained that it mostly was housekeeping and that the only real change was the apprenticeship portion which was added because it was not there. The Board decided to table this until the next meeting and vote on it with the lip pigmentation discussion.

VI. Updated Fee Schedule

Director Vlasuk gave an overview of the updated fee schedule which included:

Adding the fines from the state tobacco regulations that retailers sign on to when they get their permit

Making temporary food events from 1 and 2 day events being \$100 to \$50 per day.

Adding event organizer onto the fee schedule.

Increased Disposal Installer Exam from \$10 to \$50.

Added choke-saver to the fee schedule.

Burial Permit was \$10 but Board voted to increase to \$15 in February of 2016 but it was never updated.

Increased Well Plan Review and Permit from \$25 to \$50. This is our first online permit as well.

Motion to approve update fee schedule by Dr. Slocum, seconded by Dr. Merabi. Motion passes 3-0.

VII. COVID-19 Update

Director Vlasuk went over our current COVID-19 numbers.

In January the city saw over 600 cases which is our highest month to date. Currently, this month, the city has 62 cases which is an uptick with a 3.91% positivity. The highest day of new infections was at 9 cases. The current prediction is that we will see an uptick with the post-Easter gathering crowds.

Dr. Merabi inquired about hospitalizations. Dr. Blair explained that there were 7 cases in the hospital currently.

VIII. 2022 Beach Testing Season – Proposed Testing Locations

Director Vlasuk explained that we are currently testing the water in 4 locations at Plum Island Point, End of Island 1, End of Island 2, and 55th Street. The End of Island 1 and End of Island 2 are approximately 50 feet apart, so the suggestion is that the Board eliminates End of Island 1 and making that 1 testing site instead of 2. This would be a cost saving for pre-season testing and retesting, not that money is a factor, it mostly just does not make sense.

Dr. Merabi asked if there was another location we could test. Director Vlasuk said she would ask the Harbormaster if there's another area he suggests.

Motion to approve testing locations made by Dr. Slocum, seconded by Dr. Merabi. Motion passes 3-0.

IX. Upcoming Events

- a. Blood Drive - Tuesday, May 3rd
- b. Choke-Saver Courses – April 25th, May 9th, and May 23rd

X. Future Meetings

- a. May 26, 2022 7:00pm (fourth Thursday)
- b. June 23, 2022 7:00pm (fourth Thursday)

XI. Adjourn

Motion to adjourn made at 7:50pm by Dr. Merabi, seconded by Dr. Slocum. Motion passes 3-0.

The recording of this meeting can be viewed on the Newburyport Health Department YouTube page at this link: https://youtu.be/M6cB6Lq-D_Q.

Healthy Communities Tobacco Control Program
A Boards of Health Partnership

Amesbury
Andover
Billerica
Chelmsford
Dracut
Haverhill
Lynnfield
Methuen

Middleton
Newbury
Newburyport
North Andover
North Reading
Rowley
Salisbury
Tewksbury
Topsfield

CERTIFIED MAIL AND FIRST-CLASS POSTAGE

April 13, 2022

Newburyport One Stop
1 Kent Street
Newburyport, MA 01950

Re: Correction/Cease and Desist Order - Tobacco Product Sale to a Person Under the Age of 21

Attn: Manager/Owner:

On April 12, 2022 at approximately 2:09 p.m. your establishment sold a tobacco product to a person under the age of 21 in violation of state law 105 CMR 665.010(A).

As outlined on the Correction/Cease and Desist Order issued by the City of Newburyport’s Health Department (hand-delivered to you or your agent on the day of the unlawful sale) you have the following alternatives:

1. Pay the fine of one-thousand (\$1,000.00) within 21 days of the date of issuance of the Order; or
2. If you are aggrieved by the Correction/Cease and Desist Order, request a Hearing before the Newburyport Board of Health. This request must be made by you, in writing, and filed within seven (7) days after the date the Order was served or actually received. The written request for a hearing can be delivered to the Newburyport Board of Health, 60 Pleasant Street, Newburyport, MA 01950. Any affected party has a right to appear at said hearing.

All payments of fines shall be made to the City Clerk, City Hall, 60 Pleasant Street, Newburyport, MA 01950 . Please note that this fine of one-thousand (\$1,000.00) is required under state law 105 CMR 665.045(A).

As you know, you have a legal obligation under 105 CMR 665.020(A) to **■** all customers seeking to purchase tobacco products, regardless of age. You must verify the age of tobacco purchasers by viewing their valid government-issued photo identification cards. If you need any training to emphasize this legal obligation to your employees, please do not hesitate to contact me.

Please feel free to contact me if you have any questions regarding this notice.

Sincerely,

Ronald N. Beauregard
Tobacco Control Program Director

cc: Laura Vlasuk, Newburyport Director of Public Health
Richard Burke Jones, Newburyport City Clerk

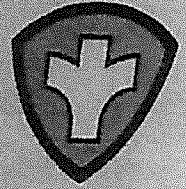
36 Bartlet Street, Andover, MA 01810
Tel: 978-490-8114

CITY OF NEWBURYPORT HEALTH DEPARTMENT

60 Pleasant Street
Newburyport, MA 01950

PHONE: 978-465-4410

WEBSITE: www.cityofnewburyport.com



Public Health
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CORRECTION/CEASE AND DESIST ORDER

Today's Date: 4-12-22
Today's Date

This CORRECTION/CEASE AND DESIST ORDER is issued to:

Newburyport One Stop / Kent St., Newburyport, MA.
Name of Establishment Street Address

Please be advised that on 4-12-22 at approximately 2:09 PM a compliance
Date of Violation Time AM/PM

check was conducted on behalf of the Newburyport Board of Health.

Newburyport One Stop violated the state law entitled "An Act to Modernize Tobacco Control"
Name of Establishment

and 105 CMR 665.000 by selling a tobacco product to a person under the Minimum Legal Sales Age.

You are hereby ordered to cease and desist from violating An Act to Modernize Tobacco Control and 105 CMR 665.000.

In addition, a fine of One Thousand dollars (\$1,000.00) is applied against Newburyport One Stop
Name of Establishment
for violation of 105 CMR 665.000.

You are hereby ordered to pay the amount of One-Thousand dollars (\$1,000.00) by check or money order made payable to the "City of Newburyport" within twenty-one (21) days of receipt of this order to the following address: Newburyport City Clerk, 60 Pleasant Street, Newburyport, MA 01950.

If you are aggrieved by this order, you have the right to request a Hearing before the Newburyport Board of Health. This request must be made by you, in writing, and filed within seven (7) days after the date this Order was served or actually received. Any affected party has a right to appear at said hearing.

Failure to comply with this order may result in additional penalties as permitted by law.

Signed by:

Signature of Agent

As agent of the Newburyport Board of Health

4-12-22

Date

MABARDY OIL INC.

720 Lafayette Rd
Seabrook, NH 030874
Phone: 603-474-0510 Fax: 603-474-8193

April 13, 2022

City of Newburyport
Board of Health Department
Newburyport MA

RE: Violation 4/12/22
Tobacco Product Sale to a Person under the Age of 21

Newburyport One Stop located at 1 Kent St Newburyport Ma request a hearing before the board of Health to discuss the \$1000.00 fine for the violation on April 12 2022. I have attached a copy of said violation.

Please contact me at the above address to when the hearing may take place.

I can be reached on my cell at 978-476-6654

Sincerely



Michael Lowry
General Manager
Salisbury Mini Mart Inc
Seabrook One Stop Inc
Mabardy Oil Inc.

The Lip Liner and Shaded Lip Liner Tutorial

Please review the Overview of Pre and Post-Procedure Protocols at the beginning of Section 18 before proceeding (see page 211).

Whether lip liners and shaded lip liners are appropriate procedures to offer during fundamental training is specific to each trainer. Lip color procedures are reported to be more challenging to many novice technicians.

More contrasting and vibrant lip colors used for the procedures are obvious if a minor mistake is made. Some laser tattoo removal professionals will not (or may be hesitant) to attempt to remove lip liners with a laser because of the possibility of white (titanium dioxide) ingredients. A lip pigment color that contains white may limit the type of laser that can be successfully used, or may add a layer of treatment to the removal process.

The lip canvas is not always symmetric and often requires delicate design corrections. The majority of lip procedure clients look to the service as a cure for unattractive lips when in reality, the results of tattooing may not be able to fully meet the client's expectations. Expectations are an important part of the consultation. This information is not intended to detour new technicians from training for lip procedures, only words of caution to consider the appropriate timing for lip procedure training; confidence is important.

Expectations of what can and cannot be achieved with a permanent cosmetic lip procedure are common subjects between clients and technicians, often based on what the client commonly achieves with traditional cosmetic lip products. Clients will present their technician their expectations regarding design and color. If a client has a history of cold sore breakouts, this can also add an element of a precautionary requirement such as needed anti-viral medication when appropriate. The darkness or evenness of color in the natural lip can also be a determining factor when deciding if a person is a good candidate for lip procedures.

As discussed in Section 17 *Basic Facial Morphology and Placement of Procedures*, a person with darker or very cool natural lips and/or variegated (two-tone) lip coloring is not often a good candidate for permanent cosmetic lip procedures (see Figure 18-37 and Figure 18-38).

Lip liners and shaded lip liners typically concentrate on the restoration of the appearance of a lip by shaping and defining the vermilion border of the lips with a pigment color that very closely matches the client's natural lip color. If a color is requested by the client that does not closely agree with the client's natural lip color, this can produce

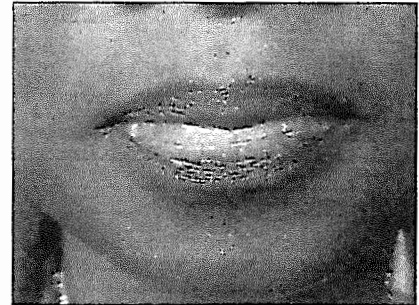


Figure 18-37: Darker Variegated Lips

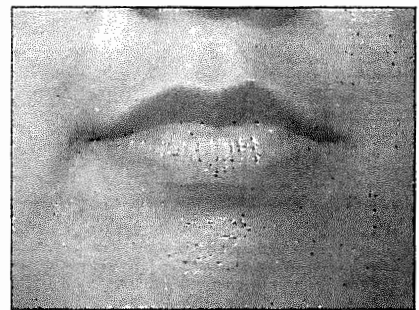


Figure 18-38: Cooler (Violet) Variated Lips

a *noticeable demarcation line* of lip pigment vs. the natural lip color that requires a cosmetic lip color product to appear finished.

Filling in low circulation areas of the lip adjacent to the vermilion border is a part of the shaded lip liner procedure. Lip liners and shaded lip liners may vary in color depending on the client's natural lip coloring and preference. Technicians have the choice not to accept clients who insist on a color that would produce a noticeably contrasting line as a lip liner.

Full lip color addresses both the vermilion border and all the skin of the lip vermilion right up to the inner lip mucosa (see Figure 18-39). This mucosal tissue begins just beyond the closed lip.

Full lip color is considered an advanced procedure that should not be attempted without the continuing education training necessary to perform the procedure well.

Offering lip liners and shaded lip liners decrease some of the inherent risks associated with full lip color procedures. The more tissue that is being tattooed (i.e., full lips), the higher the risk of a fever blister (cold sore) outbreak, color distortions, client discomfort, and in many instances additional (two or more) procedures are necessary to reach the client's goals for color intensity. The following is a profile of the lips:

The natural lip color is cool (some cooler than others) based on vascular and hormonal activity. Some lips may have obvious hyperpigmentation (darker areas of the lip color) or broken blood vessels that appear as darker blue spots/areas. To add to the complexity of permanent cosmetic lip procedures, many clients seeking lip color services have high and low circulation areas on and/or within the vermilion border. Irregular natural lip color affects the appearance of shape and the overall presentation of the lips.

Due to a decrease in vascular and hormonal activity, often a characteristic of the more mature person's lips, it is not unusual for clients to say that as they have aged they feel as if their lips have decreased in size. More mature people with fragile skin may bruise during a lip procedure. This is not uncommon for this age group (see Figure 18-40 and Figure 18-41). The bruising subsides during the healing process. It is not uncommon for lip clients to exhibit a loss of collagen in either or both the upper and lower lip, some more severe than others. The loss of collagen results in loose, less manageable lip tissue during the lip procedure.



Figure 18-39: Lip Vermilion & Inner Lip Mucosal



Figure 18-40: Before Lip Liner



Figure 18-41: Bruising During Procedure

Lip liner procedures are generally not the answer to making a person's lips appear physically larger. It is recommended that novice technicians not consider placing a permanent cosmetic lip line outside the client's natural vermilion border to the point that there is skin showing between the permanent cosmetic lip line and the client's vermilion border. Many technicians have done this only to realize that the result is the appearance of a *lip within a lip* because the vermilion border lip tissue is different from that of the skin above and inside it. Irregular color or a blurred appearance may be apparent after the lip procedure has healed or during the lip aging process. As the procedure heals and ages, often without more frequent touch-up procedures to keep the color consistent, an obvious departure from the vermilion may be seen (see Figure 18-42).



Figure 18-42: Tattooing outside the Vermilion border

This can also occur unintentionally due to the inflammation of the skin while tattooing the lip liner, causing the area to turn pink. This can lead the technician to believe it is lip skin not requiring additional tattooing.

If a client is seeking a permanent cosmetic lip procedure only to dramatically increase the size of their lips, they should consult with a medical professional.

Lip liner and shaded lip liner clients will often bring a cosmetic sample of lipstick or lip liner pencil that they feel they want to see as a healed color. This sample color is somewhat misleading because topical lip color rarely remains as it appears in the container after being applied to the lips. Cosmetic lip color is affected by oils and acids in the lip tissue, the pressure that a person exerts when applying it, and the numerous finishes/glosses incorporated into the formula or those which are applied over it. Lipstick and lip pencils also have dynamics. They are applied on the surface of the lips providing texture, often disguising natural flaws such as freckles, discoloration, etc.

Pigment that is tattooed into the lips is greatly affected by the natural color of the lips. It is not always effective at disguising discoloration flaws and is dependent on a light source reflection for seeing the maximum depth of color. It is recommended that a client is offered pigment lip liner or shaded lip liner colors that will look natural and attractive with their natural lip color, avoiding dark/cool colors that provide high-contrast to the client's natural lips. Clients should be advised that the color of their natural lips will have an effect on the permanent cosmetic pigment tattooed chosen.

The loss of pigment during the exfoliation phase of the healing process can be up to 50 percent on the vermilion border, and up to 75 percent within the lip. Depending on the properties of the pigment and color used, the client may require *at least two* appointments (the original and a follow-up visit as a minimum) to achieve the desired results.

There are many ways to conduct a permanent cosmetic lip procedure. The following sequence represents the basic steps and options of the process. As more and more lip

procedures are performed, technicians will develop techniques that they are comfortable with. If this textbook is being read in preparation for a fundamental class, and lip procedures are part of the curriculum, the trainer will give specific directions.

Pre-Lip Procedure Design Sequence

- Cleanse the client's lips and surrounding skin.
- Inspect the lips to ensure the skin is free from any visible abnormalities that may have not been noted during the consultation.

Although something minor that is seen may not prevent the procedure from going forward, take photographs and point out the irregularity to the client. If an irregularity was not noticed by the client before, it may come to their attention during the healing period (clients routinely inspect the procedural area) and it's best to address it before the procedure. Make appropriate notes on the client's chart including any information the client provides that may have the potential of affecting the outcome of the procedure. If you see it, say it, and document it.



Figure 18-43: Melting lip pre-procedure topical anesthetic

- If topical anesthetics are used, now is the appropriate time to pre-numb the lips.
- Remind the client not to talk while anesthetic is on their lips; the anesthetic will melt from the warmth of the skin and can enter the mouth and throat (see Figure 18-43).
- Wait the manufacturer's prescribed time before removing the topical anesthetic.
- Ensure the lips and surrounding skin is dry before designing the lip liner template.

Designing Lip Liners and Shaded Lip Liners

Lip Liner and Shaded Lip Liner Designs

Lips have a natural design although minor changes may be needed for symmetry purposes. Every client has lips, some more symmetric than others, some fuller than others, some with more consistent color than others, but they all have lips. The permanent cosmetic technician's designing job is focused on creating a natural design that is more color-consistent and symmetric. If this cannot be reasonably accomplished, the work should be declined.

However minimal the lip liner design may be, it is essential to provide symmetry. The goal is to ultimately create an appearance of a symmetric flattering lip line that will heal

to the desired result without any significant departure from the natural lip line.

Lips are not always symmetric in natural design, although very small changes make a very big difference. The lip liner instrument used for applying the design guideline should be single-use, and one that is or can be sharpened to a fine-tip so that the width of the drawn-on guideline is not wider than that of the needle configuration that will be used to apply the pigment.

Permanent cosmetic technicians may safely draw the permanent cosmetic template line on the vermilion border to maintain the client's natural lip shape, or directly above (adjacent to) the vermilion border to create the appearance of a slightly larger lip while maintaining the integrity of the natural lip line. If a space of skin can be seen between the line drawn on with topical lip liner pencil and the client's vermilion border, the line has been drawn too far outside the vermilion border to conduct a procedure that will appear natural when pigment is tattooed and the lip procedure heals and ages. **Note:** There are some very experienced technicians who, under ideal circumstances, can depart from the natural vermilion border with success; this is an advanced procedure. This notation is provided because there are no absolutes in the artistry of tattooing. This textbook, however, is geared to the new technician and advice is given accordingly.

If the client desires a slightly fuller appearance of their lips, the line of the design may be placed *directly bordering (adjacent to) the outside line of the vermilion border*, making minor adjustments for natural irregularities (no skin should be apparent between the design adjustments and the vermilion border). Lips framed with a darker/cooler color lip liner (not recommended) will appear smaller and the color obvious unless finished with the use of a topical cosmetic lip product. Use a color similar to the client's inner lip tissue natural coloring to increase the appearance of lip fullness.

The vermilion border is a different tissue than the vermilion tissue. As a result, this area will naturally appear to lose less pigment, approximately up to 50 percent (as opposed to the inner lip area which will appear to lose up to 75 percent of the applied color, this varies), during the healing process and may appear slightly more prominent than the lip shading. (see Figure 18-44 through Figure 18-46).



Figure 18-44: Before Shaded Lip Liner



Figure 18-45: Immediately After Shaded Lip Liner

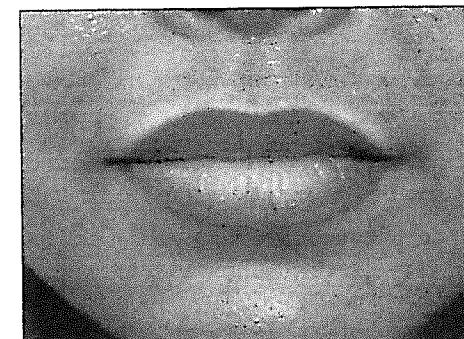


Figure 18-46: Healed

Applying the Design Guideline

- The position the client is in while the lip line guideline is applied is specific to each technician and trainer. Apply the lip design with a single-use marking device that is smear-resistant (see Figure 18-47).



Figure 18-47: Applying the Lip Template

- Apply the lip line design with a narrow line that does not exceed the width of the needle configuration that will be used. If the lip line design is applied wider than the needle to be used, a technician may tattoo on the guideline, thinking they are right on target with the design line, only to wipe it off later and observe the line is distorted.
- Once the lip liner template has been drawn, make any necessary adjustments to ensure the shape is symmetric. Provide the client with a mirror and ask for approval of the design line. Make agreed upon changes (if any).

The Lip Procedure Tattooing Process

- Technicians and trainers vary in opinions on the next step. There are technicians who prefer to insert lip support products (cotton lip rolls or lip guards as examples – both single-use products) before beginning the procedure, others do not use either of these aids until the lip line has been tattooed, using only a taut measured stretch during the procedure. Others do not use lip support products at any time. All represent options for consideration.
- Remove the sterile needle and accessories (machine or manual device accessories) and assemble the machine or manual device components.
- Where a technician begins the lip procedure is a matter of preference:
 - ◆ The tattooing process can begin at the far corners of the mouth, working the lip in quarters from the corner to the Cupid's bow on the top lip (sections one and two) and from the corners of the mouth toward the center of the bottom lip (sections three and four). Working the lip from the corners toward the center of the top and bottom lips will allow for movement of the device used to systematically proceed from the outer corners to the center on both sides of the top and bottom lips (see Figure 18-48).



Figure 18-48: Lip Tattoo Process

- ◆ Another technique is to begin at the center of the Cupid's bow working down toward the corner of the mouth and on the bottom lip beginning at the center point and work toward the corners.
- ◆ Another option is to proceed from one corner of the upper lip across to the further corner and then move to the lower lip corner across to the furthest corner.

There are many techniques for tattooing the lip liner and shaded lip liners. If reading this textbook in preparation for a class, the trainer will give specific directions. Techniques learned in class, and ultimately personal preferences, will dictate after having completed a few lip procedures.

- If topical anesthetics are used, apply the post-broken skin anesthetic and allow it to take effect for several minutes before proceeding. A good indicator the post-broken skin anesthetics are working well is the appearance of the client's blanched natural lip color if using a product containing epinephrine.
- If injected anesthetics are to be used in a medical environment, consider this a recommended appropriate time to ask the physician to conduct this service. It was important to secure the lip line design template before injections, which can cause swelling and/or bruising.
- Once the anesthetic has taken effect and this is evidenced by the blanched lip color (if the product contained epinephrine), technicians who elect to use support aids during the lip procedure consider this an appropriate time to insert a lip support product. The use of some single-use cotton rolls or mouth guards under the lips to provide support for a good stretch is specific to each trainer and technician.

The lip support material may be inserted into the mouth for the lip (top or bottom) that will be tattooed first, or support may be inserted in both (top and bottom lips) at the same time. Some clients have such small mouths that putting both lip cotton rolls (mouth guards are typically one piece), in at the same time results in discomfort for the client and may require frequent interruptions of the procedure in order to adjust the material used. Many prefer to use support material during the lip procedure, stating the following reasons for this preference: (1) they provide a solid cushion between the lip and teeth. This firmer surface will allow for a more solid stretch pressure in order to minimize the effects of a possible quivering lip; and (2) if using a cotton material, the cotton absorbs saliva. A drier mouth may reduce the need for the client to interrupt the procedure in order to swallow.

- Proceed with additional passes on the lip line if this is necessary to ensure the lip liner is secured.
- Stretch in small increments along the lip line while tattooing. **Note:** The number of passes a technician makes on the lip line is dictated by the intended healed appearance, how well the client's lips accept pigment, and how well the first guideline pass was tattooed. Some clients need

fewer passes than others. The number of passes required is evaluated on an individual basis. It is important to not overwork the skin by making unnecessary passes.

- If the client has requested a shaded/blended lip liner procedure, once the lip liner has been satisfactorily tattooed, proceed with the shading/blending portion of the process.
- If choosing to use the technique of lightly abrading/opening the lip tissue that will be subject to the shading procedure, now is the time to do so. Some technicians feel that this is a good technique to open the skin in order to prepare it to quickly accept the gel or liquid anesthetics (if using topical anesthetics) for the shading process.

There are a number of ways of accomplishing the abrading/opening process prior to tattooing pigment into the lip if this technique is used. Some use the same needle used for the lip line tattoo, slightly grazing the skin to open it for the shading process. Others report they open a new sterilized needle configuration because the shading needle is different from the liner needle used.

In either instance, lightly abrade/open the lip tissue within the lip line that has just been applied; then apply post-broken skin anesthetic to the area. Wait the manufacturer's prescribed time for the anesthetic to take effect before proceeding.

- Some technicians prefer small circular motions for the shading process, others continue with a linear line across the lips, while others use an up and down (zigzag) motion. It is not unusual to employ one or a combination of these techniques.
- If using topical anesthetics, use only as needed to keep the client comfortable during the procedure. Do not apply anesthetics just because it is necessary to stop tattooing to retrieve more pigment, or during short client breaks. Excessive application of an anesthetic agent can dilute the lip pigment being tattooed and result in a lighter than expected or spotty healed result.
- If an injected anesthetic was used, depending on how much time the shading process takes, it may be necessary to apply a topical gel or liquid anesthetic to keep the client comfortable.
- Allow the client periodic breaks as needed. It is difficult to remain in the same position for long periods of time and a short break gives the client renewed energy to more easily cooperate during the procedure. It is also a good time to check the progress of the lip procedure from a different perspective.

After the Procedure Is Complete

- Cleanse any residual pigment from the face and mouth areas.
- Once the procedure is complete ask the client to sit up (if the client has been in a lying down position) and view the lip procedure. Be cautious about agreeing to make *any major changes* in the design work. The appearance of the lips immediately after the procedure is distorted from the tattooing process.
- Technicians may choose to wait until the client has had the opportunity to freshen up and the immediately-after photographs are taken before proceeding with cleaning up the worktable. During this period, the need for small detail work may be noticed that will require additional tattooing. This review should only take a short time. Leaving used product and needles on the worktable is not permitted beyond the final evaluation period.
- Take the immediately-after pictures. Take a full-face picture of the client and a close-up of the lips. If, through the eye of the camera, the work is considered satisfactory and the client agrees, proceed to the final steps of the session.

Final Steps

- The client may be asked to return to the chair/bed so that cool compresses can be applied to the lips to reduce swelling (if this is customary to do so).
- Review aftercare instructions and give an aftercare products kit (if it is policy to provide the products).
- Schedule the follow-up appointment.
- See “Section 4 - Safe Practices for Permanent Cosmetic Technicians” for Post Procedure Protocols (page 40).

Lip Procedures Stretching Techniques

Stretching techniques are very personal and unique to each technician. There are many variables to consider:

- The technician’s dominant hand (right or left)
- The size of the hands
- The device being used
- If the technician works from one side of the procedure bed or both sides
- The fit of the gloves used
- The condition of the client’s skin (firm or loose around the lips)

Each technician, based on their physical characteristics and capabilities coupled with the flexibility and/or limitations of the workplace environment must practice different

techniques to find the stretching technique that is effective and comfortable for them to use.

Considering the variables that are unique to each technician, there can be no such thing as the only way to stretch the skin for a lip procedure.

As an example of how difficult this may initially seem vs. how easily stretching techniques will ultimately become, recall how awkward it was when first beginning to type on a keyboard. Once letters were typed over and over, typing quickly and accurately became automatic. The same analogy applies to stretching techniques. It simply takes practice and repetitive movements are required. If this textbook is being read in preparation for a class, the trainer will provide specific directions.

The lips are very buoyant and tend to bleed more than the eyebrow or eyeliner procedures. They represent a larger area of skin to tattoo than the eyeliner or eyebrow procedures, and they are more likely to draw an observer's attention.

Lip stretching techniques that involve holding one finger on each of the two sides of the mouth of the upper or lower lip normally cannot ensure the focused taut stretch needed for precise placement of pigment and stabilization of lip tissue, especially if the lips are larger.

Due to the buoyancy of the lips, this type of an *end-to-end* stretch is not recommended for the initial pass of the lip line design. Although there are always exceptions, if this type of stretch is employed, the lip tissue may move forward against the pressure of the moving needle and a misplaced lip liner may result. Normally lips are tattooed with sectional stretches.

To maintain the lip line design for the initial pass, many trainers and experienced technicians recommend lightly tracing or sketching on the topical makeup lip liner template with a single-use nontoxic, semi-permanent red marker pen (other pen types are available), in order to allow placing the fingers carefully on the lips to employ a taut stretch (see Figure 18-49).

Although the gloved fingers may be placed directly on the lips, marker pen lines can be distorted. To avoid smearing and line distortion, use a *position the fingers on and lift off* motion each time a stretching position is changed.

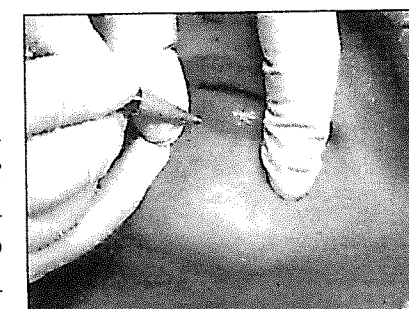
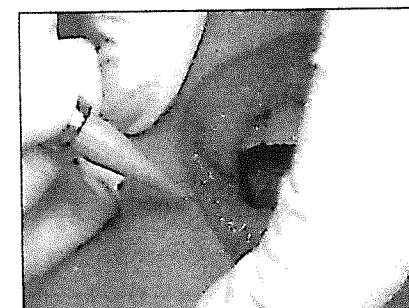
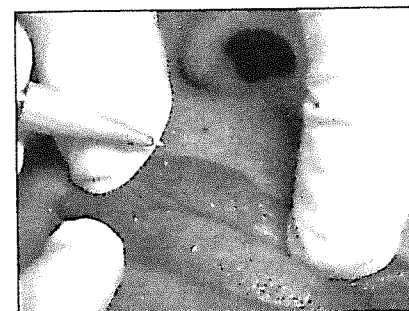
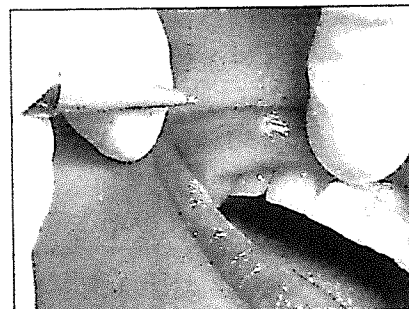


Figure 18-49: Lip Stretching Techniques

Others who do not use the single-use nontoxic, semi-permanent marker technique will avoid pressing directly *on* the topical cosmetic makeup lip liner template for the first pass. Otherwise, the topical makeup guideline is easily smeared.

It is suggested the technician press on the lip tissue directly above where tattooing with the middle and index fingers. Stretch backward away from the lip with the thumb

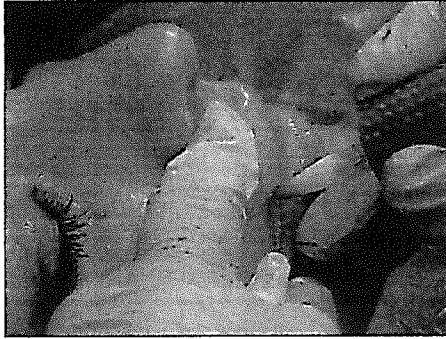


Figure 18-50: Stretching Technique



Figure 18-51: Stretching Technique

(for top liner), index, and middle fingers (for lower liner) directly behind the area that is being tattooed (optional stretching positions (see Figure 18-50 and Figure 18-51). This calculated stretching technique pushes the vermilion border of the upper lip upward and causes the skin to become more stressed and taut in the area being tattooed, while the stretch outwardly with the thumb tugs the skin in more of a straight line.

Technicians may begin the lip procedure at the outer corner of the top lip, stretching as indicated above through to the middle of the Cupid's bow area and then tattoo lower lip on the same side from the outer corner to the middle of the lower lip. Or, technicians may elect to reverse this technique and stretch and work from the center of the Cupid's bow downward toward the corner of the mouth per section on the top and from the center to the corner of the mouth per section on the bottom lip.

Change positioning to the opposite side of the client if this is preferred and an easier position to work from and tattoo the lip tissue from that side in the same manner. If it is preferred to remain on the primary side (right or left), establish a taut stretch from that position and tattoo toward, not away from yourself (see Figure 18-52; this is a machine device technique).



Figure 18-52: Lip Stretching Techniques

Working from one side for lip procedures is not a common technique for technicians who use the manual device, and they typically must switch from side to side as they work. There are times when positioning of the procedure bed (and the availability to work from both sides) dictates which position tattoo and managed stretching techniques are used.

By working the skin in identical directions from the outer corners toward the center of the mouth (or in reverse) in four sections, there is less probability of loose skin moving (see Figure 18-53).

If the lip line has not been marked with a single-use nontoxic, semi-permanent marker, once the lip line has been tattooed and the topical cosmetic guidelines, which were required for the initial pass, are no longer needed, the stretching fingers can then be laid directly on the lip without fear of loss of guidelines, applying short-span stretches directly on the area of the lip that is being tattooed.

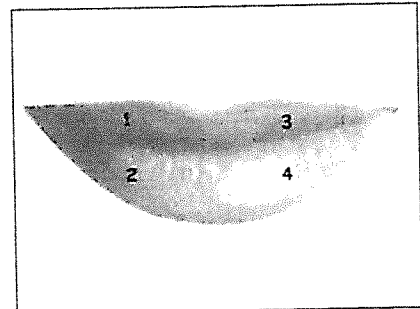


Figure 18-53: Working in four sections

If shading is included in the lip procedure being conducted, once the lip line has been tattooed successfully, the stretching fingers may be placed directly on the lips in short stretch spans for the shading process.

There are many effective lip procedure stretching techniques. The techniques presented in this section are examples for consideration.

Ultimately each technician will customize lip stretching techniques that are based on their unique requirements and preferences. The concept to master is to employ a stretch that keeps the fingers off the drawn-on topical makeup guideline as much as possible until the lip line is tattooed.

How Will I Look?

How people look to others is always subjective. Many people tend not to notice permanent cosmetic procedures that have been tattooed on co-workers, partners, or family members unless they have been previously advised of the event. Lip procedures may be the exception; they draw attention, whereas eyeliners and eyebrow procedures may escape notice. On the other hand, there are some people who notice even minor changes and are not shy about inquiries.

If a client returns to work or has a social event soon after, feedback from clients indicate their female coworkers sometimes noticed that something was different, but the exact source of the change was not obvious to them. Women seem to be much more curious about changes in other women than men are. Just imagine overhearing John ask Steve, *"Hey Steve, I really like your new hair color, what brand did you use this month?"* Or...*"Steve, I know you have done something to yourself that makes you look so rested and aesthetically pleasing, come on, tell me what you have done?"* It just doesn't seem to routinely happen between men as much as women, and when it comes to a man asking personal questions of a woman, this is even less likely to happen. This is characteristically a woman-to-woman or woman-to-man issue that technicians have to help their clients deal with.

How clients feel they look is also very dependent on whether they normally applied topical cosmetics before the permanent cosmetic procedure(s). If they typically wore makeup, they may not see much of a difference between how they looked with makeup on and how they look immediately after the permanent cosmetic procedure, with the exception of localized skin irritation. Often this is dependent on the client's skin type.

On the other hand, if the client ordinarily did not wear any makeup, the new look may take a few days to consider the new appearance *familiar*. If a client is very sensitive to comments or opinions from others, is a person that did not previously wear topical cosmetics, if they are socially active, or work outside the home, appointments should be timed so they have a few days for the appearance of the procedure(s) to calm.

The color of skin, the color of the pigment used for the procedure, the extent of the procedure, (i.e., the width of eyeliner, and the different types of lip and eyebrow procedures), and whether the client tends to swell from small injuries all play a role in the *immediately after* the procedure appearance.

For instance, if a person of color has an eyebrow or eyeliner procedure, there may not be much of a difference between how they looked with topical cosmetics and how they look immediately after the procedure. A person with lighter skin may see a greater difference in the topical cosmetic look vs. their new permanent cosmetics for a few days. The contrast of the pigment with lighter skin and any associated skin irritation produced by the tattooing process may be more noticeable to others than if the procedure were performed on a person of color.

Eyebrow procedures cause very little if any swelling, so the primary focus is on the change of color in the eyebrow area and any skin irritation that may be obvious on some lighter skin types. At the appointment, care should be taken to provide an eyebrow client with the choice of pigment colors that will result in a natural appearance based on their skin tone and natural eyebrow hair (if the client has eyebrow hair).

Working conservatively (a safe mode) also enables clients to become accustomed to their new eyebrow color. Some technicians routinely give a new brow client a wash of pigment color (diluted pigment). If they untimely want more color, this can be achieved at the follow-up visit. It's considered better to have a client return asking for more color at a follow-up appointment than for them to report they felt it necessary to take off work for a few days or cancel social engagement(s) because the color they left with was so bold they were uncomfortable with their appearance.

Clients with lighter skin will show the lightest of color tattooed more dramatically than the person with darker skin shows the darkest of color that has been tattooed. Why? Because lighter skin shows the effects of inflammation from the tattoo process more predominantly and even the lightest of colors provides a greater visible contrast.

Figure 18-54 and Figure 18-55 show before and immediately-after photos of two women, one with Fitzpatrick Type I skin with a light color pigment applied and one with Fitzpatrick Type V skin.

Client History Profile Form

Name	Date	Gender - F <input type="checkbox"/> M <input type="checkbox"/>	Age
Address	City	State	Zip
Employer/Occupation	Ph-H	Ph-W	Ph-Cell
How did you select me for your permanent cosmetic services?	E-Mail	Physician's Name	Physician's Ph. No.

1	YES	NO	Are you pregnant or nursing?	27	YES	NO	Do you consume aspirin daily?
2	YES	NO	Have you had any alcohol in the last 24 hours?	28	YES	NO	Are you under treatment for depression?
3	YES	NO	Have you ever had cold sores/herpes/fever blisters?	29	YES	NO	Do you have a history of cold sores/fever blisters?
4	YES	NO	Do you have any allergies to latex?	30	YES	NO	Are you sensitive to petroleum-based products?
5	YES	NO	Have you had a laser or chemical peel within 6 months?	31	YES	NO	Do you have Botox injections?
6	YES	NO	Have you ever had any permanent cosmetics or tattoos applied?	32	YES	NO	If you have permanent cosmetics or tattoos did you have any problems with healing after they were applied?
7	YES	NO	Do you bruise easily?	33	YES	NO	Are you undergoing radiation or chemotherapy treatment?
8	YES	NO	Do you routinely use Retin-A, glycolic, or other exfoliating products?	34	YES	NO	Are you now, or have you ever been on the acne treatment Accutane?
9	YES	NO	Do you wear contact lenses?	35	YES	NO	Do you have an implanted cardiac device (ICD)
10	YES	NO	Are you allergic or sensitive to any metals, for instance, metals used for jewelry?	36	YES	NO	Do you take prescription drugs?
11	YES	NO	Do you have any problems healing from small wounds?	37	YES	NO	Are you anemic?
12	YES	NO	Do you use Latisse® or any other eyelash growth product?	38	YES	NO	Do you have a history of skin sensitivities?
13	YES	NO	Do you use tobacco? If you use tobacco you may heal slower and this affects the timing on scheduling a touch-up appointment, if applicable.	39	YES	NO	Do you have any medical condition that has resulted in a medical professional requiring you to pre-medicate with an antibiotic prior to a dental or other invasive procedure?
14	YES	NO	Do you have a heart conditions?	40	YES	NO	Do you have allergies to topical makeup?
15	YES	NO	Are you diabetic? If so, Type 1 or Type 2?	41	YES	NO	Do you have dry eyes?
16	YES	NO	Do you have any autoimmune disorders?	42	YES	NO	Do you intentionally tan—direct sun or tanning bed?
17	YES	NO	Are you sensitive or allergic to hand creams or body lotions?	43	YES	NO	Do you <i>personally</i> have any history of cancer?
18	YES	NO	Do you have your lips injected with filler materials?	44	YES	NO	Do you have a history of stroke or heart attack?
19	YES	NO	Do you menstruate? If yes: Next cycle date	45	YES	NO	Do you have problems being anesthetized for a dental procedure?
20	YES	NO	Do you hyperpigment? (Tendency to develop dark spots in the skin from wounds or sun)	46	YES	NO	Do you hypopigment (lack of pigment in the skin)?
21	YES	NO	Do you tend to develop keloid or hypertrophy scars?	47	YES	NO	Are you allergic to colorants?
22	YES	NO	Do you scar easily from minor skin injuries?	48	YES	NO	Do you have glaucoma or any other medical eye condition?
23	YES	NO	Do you have any seizure related conditions?	49	YES	NO	Do you have arthritis?
24	YES	NO	Do you have a tendency to faint or become dizzy?	50	YES	NO	Do you have high or low blood pressure?
25	YES	NO	Do you bleed excessively from minor cuts?	51	YES	NO	Do you have sinus problems?
26	YES	NO	Do you have prosthetic implants?	52	YES	NO	Have you ever been diagnosed with hepatitis?

If you answered Yes to any questions above, use the space below and the reverse side of this form to provide an explanation. Correlate your explanations to a specific question number. A yes answer does not indicate you are not an acceptable candidate for permanent cosmetics. It may simply be information that is valuable to me as your technician as each person's body is unique, or it may indicate that based on any health conditions that affect healing, it would be advisable or required for you to consult with your physician before proceeding. If this form has not addressed a medical condition you have, please list it below.

Client Signature: _____ Date: _____

Fitzpatrick Skin Evaluation Chart

The Fitzpatrick Scale:

Type 1 (scores 0–7) White/Subject to sunburn

Type 2 (scores 8–16) Tan/Capable of tanning

Type 3 (scores 17–25) Dark/Capable of tanning – Prone to hyperpigmentation

Type 4 (scores 25–30) Dark – Prone to hyperpigmentation

Type 5–6 (scores over 30) Very dark – Prone to hyperpigmentation

Fitzpatrick Skin Evaluation						
Score	0	1	2	3	4	Score
What is the color of your eyes?	Light blue, Gray, Light Green	Blue, Gray or Green	Dark Blue or Hazel	Dark Brown	Brownish Black	
What is the natural color of your hair?	Sandy or Red	Blonde	Chestnut/ Dark Blonde	Dark Brown	Black	
What is the color of your non-exposed skin?	Reddish	Very Pale	Pale with Beige Tint	Light Brown	Dark Brown	
Do you have freckles on unexposed areas?	Many	Several	Few	Incidental	None	

Total Genetic Disposition Score: _____

Score	0	1	2	3	4	Score
What happens when you stay in the sun too long?	Painful redness, blistering, peeling	Blistering followed by peeling	Burns sometimes followed by peeling	Rarely burn	Never had burns	
To what degree do you turn brown?	Hardly or not at all	Light color tan	Reasonable tan	Tans easily	Turns dark brown quickly	
Do you turn brown within several hours after sun exposure?	Never	Seldom	Sometimes	Often	Always	
How does your face react to the sun?	Very sensitive	Sensitive	Normal	Very resistant	Never had a problem	

Score	0	1	2	3	4	Score
When was the last time you exposed your body to the sun, tanning bed or self-tanning cream?	More than 3 months ago	2–3 months ago	1–2 months ago	Less than a month ago	Less than 2 weeks ago	
How frequently do you expose the area to be treated to the sun?	Never	Hardly ever	Sometimes	Often	Always	

Total Combined Score: _____

Informed Consent Form

Client Name: _____

The nature and method of the proposed permanent cosmetic (cosmetic tattoo) procedure has been explained to me by my technician and/or by her or his associate(s) including the usual risks inherent in the tattooing process, and the possibility of complications during or following its performance. I understand there may be a certain amount of discomfort or pain associated with the procedure and that other adverse side effects may include minor and temporary bleeding, bruising, redness, or other discoloration and swelling. Fever blisters may occur on the lips following lip procedures. Fading or loss of pigment may occur. Secondary infection in the area of the procedure may occur; however, if properly cared for, is rare. _____ *(Init)*

- I understand a pigment (skin) test of the pigment to be used for my procedure is offered upon request and the test result is not assessed by a medical professional unless I make arrangements to have this done myself. A nonreactive skin test does not prevent an allergic reaction occurring at a future point in time. I accept all associated risks of requesting or declining pigment (skin) test.

I decline the skin test _____ (Init) OR I request a skin test _____ (Init)

Please initial one of these options.

Client Signature _____ Date _____

- I have informed my permanent cosmetic technician and/or her or his associates of any existing health problems. _____ *(Init)*
- I acknowledge that complications are always possible as a result of the permanent cosmetic procedure, particularly in the event my post-procedural instructions are not followed. _____ *(Init)*
- I acknowledge that hyperpigmentation (darkening of the skin) or hypopigmentation (the absence of color in the skin), or scarring is a possibility as result of my body's reaction to the skin being broken during the procedure. I realize that my body is unique and that my permanent makeup technician and/or her associate(s) cannot predict how my skin may react as a result of this procedure. _____ *(Init)*
- I acknowledge the receipt of written instructions advising me of the proper care of my procedures and I recognize the absolute necessity for following these instructions. _____ *(Init)*
- I acknowledge that the procedure will result in a permanent change to my appearance and that no representations have been made to me as to the ability to later change or remove the results. _____ *(Init)*
- I understand that future laser treatments or other skin altering procedures, such as plastic surgery, implants, and injections may alter and degrade my permanent makeup. I further understand that such changes are not the responsibility of my permanent makeup technician. I further understand that such changes in my appearance may not be correctable through further permanent makeup procedures. _____ *(Init)*

client specific. If the procedural area is dense enough (can be easily seen) that one application of pigment will bring the color back to its original appearance, a color refresher fee will be charged that represents a lower charge than the fee charged for new work. If the procedural area is extremely light and only represents a weak version of the original procedure, or if it is not visible, a procedure fee for new work in effect at the appointment when the color is reinstated will be charged.

_____ *(Init)*

- I have read and understand the contents of each paragraph above. I have received no unrealistic warranties or guarantees with respect to the benefits to be realized from, or consequences of, the aforementioned procedure(s). _____ *(Init)*
- Your signature below represents consent for permanent cosmetic services and shall remain in effect during the entire period you remain a client of XXXXX.

_____ *(Init)*

I acknowledge by signing this consent form, I have been given the full opportunity to ask any and all questions about the permanent makeup procedure(s) and process(es) from my permanent makeup technician and/or her associate(s).

Client: _____ Date: _____

I personally reviewed the above information with my client, or the client's representative.

_____ Date: _____

Permanent Cosmetic Technician

Terms and Policies

Deposit

A non refundable deposit is required to schedule an appointment for Microblading. The deposit will be used as a guarantee for your appointment.

Should you not show up, arrive more than 15 minutes late, or cancel/reschedule without 48 hours notice, your deposit will be forfeited. Deposits will be applied towards the cost of your service or carried over to be used at a future appointment, it is up to the client.

The deposit for Microblading is \$50 and is required for all appointments. All deposits are non refundable, no exceptions.

Cancellation Policy

48 hour notice is required in the event you need to cancel or reschedule. Any rescheduled, or cancelled appointment with less than 48 hour notice will result in the forfeit of your deposit. If you do not show up to your appointment, your deposit will be forfeited. An additional deposit will be required to make a new appointment. If 2 appointments are missed, canceled, or rescheduled, payment in full for services scheduled will be due prior to the scheduling another appointment and such payment will be subject to the same terms of forfeit for no show, cancellation or rescheduling as listed above. There are no exceptions to these policies.

Rescheduling/Late Policy

To avoid unfair delays to clients, if you are more than 15 minutes late to your appointment it will be necessary to reschedule. This will result in the loss of your deposit and will require another deposit to schedule the next appointment. We understand that unforeseen circumstances may arise that could force you to postpone/reschedule your procedure. Please understand that such changes affect not only your technician, but other clients as well. If you must reschedule an appointment, 48 hours is required in order to keep your deposit.

Procedure Chart Notes

Client Name (First, Last) _____

Consultation Date: _____ Procedure Date: _____

Procedure Type and Pigment Used: _____

Machine and needle(s) used: _____

Anesthetic Used: Unbroken: _____ Broken: _____

Before Photo Taken: _____ After Photo Taken: _____

Design of procedure was agreed to, pigment color selection was agreed to, sterilized needles and tubes were shown in manufacturers packaging before opening, and clear aftercare instructions were given and fully understood. Client initials: _____

If eyeliner was performed, client verifies (s)he was released in good condition.

Client initials _____

PROCEDURE NOTES: _____



Consultation Date: _____ Procedure Date: _____

Procedure Type and Pigment Used: _____

Machine and needle(s) used: _____

Anesthetic Used: Unbroken: _____ Broken: _____

Before Photo Taken: _____ After Photo Taken: _____

Design of procedure was agreed to, pigment color selection was agreed to, sterilized needles and tubes were shown in manufacturers packaging before opening, and clear aftercare instructions were given and fully understood. Client initials: _____

If eyeliner was performed, client verifies (s)he was released in good condition.

Client initials _____

PROCEDURE NOTES: _____

Micropigmentation (Semi-Permanent Makeup)
Informed Consent

Name: _____ Date Of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

How did you hear about us? (circle) Google / Facebook / Instagram / Yelp / Other / Referral (name) _____

The nature and method of the proposed semi-permanent makeup (cosmetic tattoo) procedure has been explained to me as having the usual risks inherent in the procedure and the possibility of complications during and following its performance. I understand that there may be a certain amount of discomfort or pain associated with the procedure and that other possible adverse side effects may include: minor and temporary bleeding, bruising, redness or other discoloration and/or swelling. Fever blisters may occur on the lips following lip procedures in individuals prone to this problem. Fading or loss of pigment may occur. Secondary infection in the area of the procedure is rare if properly cared for, but may occasionally occur.

By signing below, I specifically acknowledge that I have been advised of the facts and matters set below, and I agree as follows:

(Please initial the line next to the number after you clearly understand each statement)

1. _____ I have informed the practitioner of any and all of my known allergies. I acknowledge that it is not always reasonably possible to determine in advance whether I might have an allergic reaction to any of the pigments, dyes, topical preparations, or processes used in the procedure; and I agree to accept the risk that such reaction is possible.

2. _____ I acknowledge that complications as a result of semi-permanent makeup procedures may occur, particularly in the event that the post-procedural instructions are not followed, and accept full responsibility for such complications.

3. _____ I realize that my body is unique and neither Beautique nor its employees or contractors can predict how my skin may react as a result of the procedure.

4a. _____ I have previously had micropigmentation performed by someone other than Beautique on the same area (brows, lips, etc) that I am asking Beautique to work on today

____ YES ____ NO

4b. _____ IF YES, I understand that correcting or touching up micropigmentation that was performed by others involves additional risks because of the existence of permanent pigments of unknown composition, brand, color, age, shape and other factors over which Beautique has no control. I understand that additional appointments after the initial and followup appointments may be required, and will be billed at Beautique standard rates. I understand that Beautique can not predict the results in advance and can not guarantee and has not represented that the results will be as I desire. I understand and fully accept the risks associated with this procedure and hold Beautique harmless from same.

5. _____ I acknowledge that the procedure may result in a long-lasting (many years) change to my appearance and that no representations have been made to me as to the ability to later change or remove the results.

6. _____ I understand that future skin altering procedures such as laser treatments, plastic surgery, implants, and/or injections may alter and degrade my semi-permanent makeup, and that I must inform any future service provider that I have had micropigmentation applied. I understand and accept that such changes are not the fault of Beautique or its employees or contractors. I further understand that such changes or degradation in my appearance may not be correctable through further semi-permanent makeup procedures.

7. _____ I consent to the admittance of authorized observers to the procedure(s) for the purpose of education or assistance.

8. _____ I acknowledge that obtaining the semi-permanent makeup is my choice alone, and I consent to the procedure and to its attendant risks, and to any actions or conduct of Beautique and its employees and contractors reasonably necessary to perform the procedure.

9. _____ I understand that I will have the opportunity, within the time constraints of my appointment, to approve the design and color of the semi-permanent makeup to be applied, and I accept responsibility for same.

10. _____ I consent to any relevant photographs being taken both before and after the procedure, to document the results of the procedure strictly for the internal use of Beautique.

11. _____ [Optional/Requested] I consent to Beautique using "before & after" photos of me for marketing purposes to display its capabilities and results. If I do provide consent, I may at any time withdraw such consent for specific photographs by contacting Beautique, which will then discontinue use of said photo(s).

12. _____ I have been given the full opportunity to ask any and all questions which I might have about obtaining semi-permanent cosmetic procedures from a micropigmentation specialist at Beautique, and that all of my questions have been answered to my full and total satisfaction.

If you have previously had micropigmentation performed by Beautique, has your medical history changed since you last filled out Beautique Medical Profile form?

____ YES ____ NO

If YES, please specify. _____

I have read and understand the contents of each statement above. I acknowledge that this is a contract and that I have received no warranties or guarantees with respect to the benefits to be realized from, or consequences of, the aforementioned procedure(s). I further acknowledge that at the time of signing this consent I am of sound mind and capable of making independent decisions for myself. I hereby release and forever discharge and hold harmless Beautique and its owners, managers, employees and affiliates from any and all claims, damages or legal actions arising from or connected in any way with my micropigmentation, or the procedure and conduct used in my performing my tattoo, to the fullest extent allowed by the law.

Name (Please print legibly)

Date

Client Signature

Date

Parent Or Legal Guardian (If Client Is Under 18)

Date

Practitioner statement:

I have personally reviewed the above information with my client or the client's representative.

Practitioner Signature

Date

Office Use Only
Artist must initial after taking mandatory "Before" photo.

Micropigmentation Touch Up Service Re-Consent Form

Please read and initial each statement after you clearly understand each statement.

1. Are you pregnant or nursing? Yes []
No []

2. I absolutely understand and accept that such procedure is a process, sometimes requiring multiple applications of color to achieve desirable results and that 100% success cannot be guaranteed. _____

3. I have received, reviewed and understand the pre-procedural instructions as given to me and agree to follow them. _____

4. Depending on the procedure(s) I select, I accept responsibility for approving the shape, and position of eyebrows, eyeliners, lip liner and/or full lip color. _____

5. I understand that the color selection and color results are affected by my skin tone and undertones, and may not be perfectly predictable in advance. _____

6. I understand that cosmetic surgery, Botox, Restalyne, and other cosmetic procedures performed before or after my procedure with COMPANY can affect the location and symmetry of my semi-permanent makeup. I assume this responsibility. _____

7. I am aware that if I am to receive an MRI after the procedure, I must tell the Radiologist that I have iron oxide permanent cosmetics. _____

8. If I am a lens wearer, I realize that I must keep my lenses out the day of an **eyeliner procedure**. _____

9. I understand that this procedure will fade and this fading can alter the original pigment color and that this may indicate that it is a time for a touch-up visit. _____

10. I realize this is an elective cosmetic procedure and is not medically necessary. _____

11. The following possibilities may occur: Minor and temporary bleeding, bruising, redness or other discoloration; swelling; fever blisters on the lip area following lip procedures and/or fading or loss of pigment. _____

12. I understand that many lasers & IPL's (Intense Pulse Lights) including those used for hair removal, anti-aging, Photofacials, removal of lines may or will turn permanent make up dark or even black. I agree to inform my esthetician or anyone operating such that I have permanent make up. _____

13. In the event of a complication with my procedure, I give my consent to COMPANY to confer with my physician(s) for medical information required for the safety of my procedures.

14. In the unlikely event my practitioner is stuck with a needle during my procedure, I agree to accompany her/him to an emergency room to take a blood test for their safety. I agree to disclose relevant test results to my practitioner. _____

15. If an infection occurs after my procedure, I agree to seek *immediate* treatment from my primary care physician or an emergency room. _____

16. Has your health history changed regarding medication, joint replacement or anything artificial in your body?

Yes []

No []

If YES, please specify and also list any new medications.

ACCEPTANCE

My signature below signifies that I have fully read and fully understand the issues and risks listed. I certify that the information above is accurate and that I have had the opportunity to ask any questions I may have, and that my questions have been answered to my full satisfaction.

NAME (PLEASE PRINT LEGIBLY) DATE

CLIENT SIGNATURE DATE

SIGNATURE OF PARENT/LEGAL GUARDIAN IF CLIENT IS UNDER 18 DATE

WITNESS SIGNATURE DATE

Confidential Medical Profile - Micropigmentation

Name: _____ Date Of Birth: _____

Address: _____

To Avoid Unforeseen Complications, Please Answer The Following Questions

Are you under 18? If so, guardians initials _____ <input type="checkbox"/> yes <input type="checkbox"/> no	Are you allergic to any metal? <input type="checkbox"/> yes <input type="checkbox"/> no
Have you had any aspirin or blood thinners in the past week? <input type="checkbox"/> yes <input type="checkbox"/> no	Have you ever had any semi-permanent makeup procedures before? <input type="checkbox"/> yes <input type="checkbox"/> no
Any mood altering drugs within the last 8 hours? <input type="checkbox"/> yes <input type="checkbox"/> no	Are you on any immunosuppressive medications such as anti-inflammatories or steroids? <input type="checkbox"/> yes <input type="checkbox"/> no
Do you have a history of cold sores, herpes, or fever blisters? <input type="checkbox"/> yes <input type="checkbox"/> no	Are you allergic to topical antibiotic preparations or desensitizers? <input type="checkbox"/> yes <input type="checkbox"/> no
Are you sensitive/allergic to latex? <input type="checkbox"/> yes <input type="checkbox"/> no	Is there any history of skin diseases or remarkable skin sensitivities? <input type="checkbox"/> yes <input type="checkbox"/> no
Have you had a chemical peel or laser? <input type="checkbox"/> yes <input type="checkbox"/> no If so, when? _____	Are you currently taking any vitamins a or e in any form? <input type="checkbox"/> yes <input type="checkbox"/> no
Do you have problems healing? <input type="checkbox"/> yes <input type="checkbox"/> no	Are you pregnant or nursing? <input type="checkbox"/> yes <input type="checkbox"/> no
Are you currently undergoing radiation or chemotherapy? <input type="checkbox"/> yes <input type="checkbox"/> no	Are you required to take antibiotics during dental or invasive medical procedures? <input type="checkbox"/> yes <input type="checkbox"/> no
Are you currently using any retin-a or alpha-hydroxy skin care products? <input type="checkbox"/> yes <input type="checkbox"/> no	Do you wear contact lenses? (if yes i understand they must be removed during my eyeliner procedure and should not be replaced until the next day) <input type="checkbox"/> yes <input type="checkbox"/> no
Previous problems with tattoos or has your physician advised you not to have a tattoo at this time? <input type="checkbox"/> yes <input type="checkbox"/> no	

List all medications you are currently taking:

Please Circle Any Of The Following Which May Pertain To You

Heart Conditions	Allergies To Makeup	Accutane Treatment	Dry Eyes
Diabetes	Stroke	Chest Pains	Alopecia
Refractive Eye Surgery	Glaucoma	Trichotillomania	Keloid/Hypertrophy Of Scars

Epilepsy/Seizures	Shortness Of Breath	Autoimmune Disorder	Cancer (Any)
Hepatitis/ Jaundice	Hiv	Kidney Disease	Tendency To Develop Fever
Blisters On The Lip	Ocular Herpes	Hyperpigmentation	Hypopigmentation
Tendency To Bleed Excessively From Minor Injuries			

List any other medical conditions or issues not addressed above:

Primary Physician's Name: _____

Primary Physician's Phone Number: _____

By signing below, I acknowledge, understand and agree that:

- the staff at Beautique do not practice medicine, does not accept health insurance, and have made no representation to the contrary;
- the information provided on this form is accurate and complete to the best of my knowledge, and that Beautique is not responsible for complications or problems arising from any incorrect or omitted information;
- some individuals will have complications related to semi-permanent makeup application. These complications are usually mild and last only a few days. However, extreme complications are always a possibility. I accept these risks and agree to hold Beautique and its employees and contractors harmless for same;
- the staff at Beautique will use the information provided above to assess my suitability for the proposed micropigmentation services.

Client signature (or guardian if under 18 years of age)

Date

Lip Micropigmentation Post Procedure Care

General

Micropigmentation (semi-permanent makeup) procedures are affected by the “canvas” (your skin) that they are performed on. Lifestyle, medications, smoking, metabolism, facial surgery and other procedures, and age of skin all contribute to fading. The initial application is always applied conservatively because every person’s skin is different and the final color can only be precisely determined and adjusted during a follow-up appointment after the initial application has fully healed. Because of this, the micropigmentation process is not complete after the initial procedure. In all cases, a follow-up appointment is required approximately 30 days after your initial application to fine tune and ensure the best result.

Though rare, infection is possible. If you see signs of infection such as persistent increased redness or swelling, fever, drainage, or oozing, contact your doctor immediately.

- Apply ice packs as necessary to prevent or reduce swelling.
- When the area starts to flake, leave it. Do not pick, peel or pull on the skin.
- Apply a thin coat of ointment to the area twice a day for 3-4 days before showering and after cleansing.
- Avoid sweating such as from vigorous exercise for 24 hours.
- For at least one week post-procedure or until healing is complete (whichever is longer):
 - Keep your hands clean and avoid touching the affected area(s).
 - Do not scrub or pick treated areas.
 - Do not use peroxide or Neosporin on treated areas.
 - Do not expose area to direct sun or to tanning beds.
 - Avoid exposing the area excessive moisture or humidity, such as: facials, swimming, whirlpools (hot tubs), saunas, steam rooms, and steamy showers.
- Avoid Retin-A, moisturizers, glycolic acids, exfoliants and anti-aging products **at all times** (not just during healing) on all micropigmented areas. These can cause pigments to fade and lighten prematurely.
- Avoid tanning beds, sun, chlorine spas and pools, soap and chemicals (including skin cleansers, makeup removers, alpha hydroxyl creams, and tooth whitening toothpaste) near the treated area until healed.
- Pigments will slowly fade over time according to one’s metabolism, skin type, sun exposure, medication, facial surgery, and smoking. Schedule maintenance visits as needed to keep it looking fresh.
- Periodic touch ups will ensure longer lasting results.

Lip Liner and Full Lip

- Apply ice for the first 2-24 hours to reduce swelling.
- Keep moist with of ointment for the next 3-4 days, and then switch to lip balm or lipstick with an SPF of 15 or greater as the sun tends to fade lip color quickly.
- Lips may appear to have too much color in the days following the procedure. You may add makeup to soften the color.
- Scars on the lips from fever blisters cause pigment removal. See our Pre-Procedure Instructions for lips.

Lip Micropigmentation Healing Schedule

If you’ve never had micropigmentation before, there are a lot of unknowns. One of the most common questions we’re asked is what to expect during the healing process. While every person is different and some heal more quickly or slowly than others, here’s generally what to expect.

Temporary side effects from micropigmentation include but are not limited to: redness, swelling, puffiness, bruising, dry patches and tenderness.

You should expect to lose approximately 1/3 of the initial color during the healing process. We have selected the optimal pigments for you with this in mind. In approximately six days it may appear too light. After about 10 days, the color will show more. It will appear softer when completely healed.

Day	Effect
1	Swelling, tender, heavy, thick lipstick look with reddish brick color. For the first few days, the color is darker than it will appear when healed.
2	Slight swelling, reddish, tender, with a slight metallic taste.
3	Less swelling, thicker texture, sore, hot feeling before exfoliation with an orange color.
4	Exfoliation begins, very chapped lips. The color will become lighter as the epidermis sloughs off. It will appear that you have lost all of your color, however, when your lips have healed completely, the dermal layer will gradually become darker.
5	Very chapped but almost finished with first chapping stage.
6	A soft, rich color begins to appear.
7-13	Lip color disappears and the "frosty" 2nd chapping stage begins as a whitish gray haze on the lips.
14	Color blooms from within more and more each day until day 21 (3 weeks post procedure).
21	Healing complete. The color you see is the color that you have. Your lips will remain a bit dry for a month or two. Use a good lip balm and they will return to normal with full color.

I UNDERSTAND AND ACCEPT THAT FAILURE TO FOLLOW THE POST-PROCEDURE INSTRUCTIONS ABOVE MAY RESULT IN A LOSS OR DISCOLORATION OF PIGMENT RESULTING IN A NEED FOR MORE FREQUENT TOUCHUPS.

Name (Please print legibly)

Date

Client Signature

Date

Parent Or Legal Guardian (If Client Is Under 18)

Date

Practitioner statement:

I have personally reviewed the above information with my client or the client's representative.

Practitioner Signature

Date

Eyebrow Micropigmentation Post Procedure Care

General

Micropigmentation (semi-permanent makeup) procedures are affected by the “canvas” (your skin) that they are performed on. Lifestyle, medications, smoking, metabolism, facial surgery and other procedures, and age of skin all contribute to fading. The initial application is always applied conservatively because every person’s skin is different and the final color can only be precisely determined and adjusted during a follow-up appointment after the initial application has fully healed. Because of this, the micropigmentation process is not complete after the initial procedure. In all cases, a follow-up appointment is required approximately 6-8 weeks after your initial application to fine tune and ensure the best result.

Though rare, infection is possible. If you see signs of infection such as persistent increased redness or swelling, fever, drainage, or oozing, contact your doctor immediately.

Eyebrows

- After 5-6 hours following your procedure, cleanse the brows with a simple soap such as Ivory or Dove, then immediately apply a very thin coat of healing ointment.
- Continue gently cleansing and applying ointment 2-3 times per day for 3-4 days (or until all scabbing/crust has come off).
- When the area starts to flake, leave it. Do not pick, peel or pull on the skin.
- Avoid sweating such as from vigorous exercise for 1 week post-procedure.
- For at least one week post-procedure or until healing is complete (whichever is longer):
 - Keep your hands clean and avoid touching the affected area(s).
 - Do not scrub or pick treated areas.
 - Do not use peroxide or Neosporin on treated areas.
 - Do not expose area to direct sun or to tanning beds.
 - Avoid exposing the area excessive moisture or humidity, such as: facials, swimming, whirlpools (hot tubs), saunas, steam rooms, and steamy showers.
- Do not resume any method of eyebrow hair removal or coloration for at least two weeks.
- Avoid eyebrow tinting within 48 hours before or two weeks after the procedure.
- Avoid Retin-A, moisturizers, glycolic acids, exfoliants and anti-aging products **at all times** (not just during healing) on all micropigmented areas. These can cause pigments to fade and lighten prematurely.
- Pigments will slowly fade over time according to one’s metabolism, skin type, sun exposure, medication, facial surgery, and smoking. Schedule maintenance visits as needed to keep it looking fresh.
- Periodic touch ups will ensure longer lasting results.

What will make your eyebrows fade?

- Lighter pigment - blondes fade faster than brunettes
- Oily skin - hairstrokes will both fade and blur over time
- Frequent exercise - the salt in sweat will purge the pigment from the skin
- Sun exposure - the sun bleaches everything
- Certain medications
- Anti-aging skincare products
- Acne medications and cream
- Youth – simply put, the younger/healthier you are, the faster your cells turn over

Eyebrow Micropigmentation Healing schedule

If you've never had micropigmentation before, there are a lot of unknowns. One of the most common questions we're asked is what to expect during the healing process. While every person is different and some heal more quickly or slowly than others, here's generally what to expect.

Temporary side effects from micropigmentation include but are not limited to: redness, swelling, puffiness, bruising, dry patches and tenderness.

You should expect to lose approximately 1/3 of the initial color during the healing process. We have selected the optimal pigments for you with this in mind. In approximately six days it may appear too light. After about 10 days, the color will show more. It will appear softer when completely healed.

Day	Effect
1	The eyebrows are approximately 20-25% bolder and darker in width than they will be when healed. Expect light to moderate swelling and redness. The skin's redness causes the color of the pigment to appear darker. There is some swelling, although difficult to actually see due to the thickness of the skin in the eyebrow area. This will subside. Exfoliation, which begins in a few days, will cause the excess pigment surrounding the eyebrow to flake away and a more narrow appearance will result. New skin will heal over the pigmented area and result in a softer appearance of your eyebrows. Don't be concerned that your eyebrows initially appear darker and heavier in size than you desire. This is all part of the process.
2	Conditions remain the same.
3	Eyebrows start to itch and will appear a bit thicker in texture. Exfoliation begins.
4	The skin begins to flake, peeling from the outside edges first.
5	Color finishes flaking off and appears softer and grayer for a few days until color clarifies.
6	The color has lightened from its initial overly-dark appearance. For the next few days, the color may now be lighter than what the final color will be.
10	The final color begins to stabilize and show through. The color will continue to soften as the healing process completes.

I UNDERSTAND AND ACCEPT THAT FAILURE TO FOLLOW THE POST-PROCEDURE INSTRUCTIONS ABOVE MAY RESULT IN A LOSS OR DISCOLORATION OF PIGMENT RESULTING IN A NEED FOR MORE FREQUENT TOUCHUPS.

Name (Please print legibly)

Date

Client Signature

Date

Parent Or Legal Guardian (If Client Is Under 18)

Date

Practitioner statement:

I have personally reviewed the above information with my client or the client's representative.

Practitioner Signature

Date

Cost Breakdown for Yankee Homecoming

Item	Cost per Vendor	Notes/Calculations
Administrative	\$58.96	Director – 0.5 hours – reviewing and signing off on applications, meeting with event inspectors. Office Manager – 1 hour – reviewing applications for completeness and prepping for Director, creating and printing permits, depositing fees, managing return of vendor deposits.
Inspections (Daily)	\$315.00	\$35/day/vendor for a daily inspection.
Inspections (Surveillance)	\$84.00	\$35/hour for onsite inspector for surveillance. 4 hours/day for a 9 day event comes out to a total of \$1260. If the event has 15 vendors, the cost is \$84/vendor for the week.
Power Washing Market Sq	\$133.33	Power Washing of the bullnose area of Market Sq after the event takes place. Previous costs that were found were in the \$2000 range. If the event has 15 vendors, the cost is \$133.33/vendor for the week.

Total Cost/Vendor for 9 Days - \$591.29

Temporary Permit Fee for 9 Days - \$450.00

Net Loss/Vendor – **\$141.29**

City/Town	Temporary Food Permit Costs	Is there a cap?	How much for 9 days?	Notes
Bourne	farmer market/retail - \$40/day food truck/prep - \$50/day	No	\$360 \$450	
New Bedford	\$75 first day and each additional day is \$25	No	\$275	
Beverly	\$25 /day	No	\$225	
Burlington	\$0/day - vendors do have to fill out forms for their temporary permit and the BOH does send out an inspector to the event - they typically have 1-2 day events	N/A	\$0	
Billerica	\$50 covers the whole permit for up to 14 days - not a daily charge	N/A	\$50	
Barnstable	non profit \$5/day FOR Profit- \$50 for 1-4 day permit (they don't often have events lasting more than 4 days)	N/A	\$45 \$50	
Brewster	\$30 covers the full 14 days	N/A	\$30	
Malden	\$350 flat fee	N/A	\$350	
Waltham	\$55/day. Typically they do not have events longer than a few days so they have not ran into a cap issue.	Unknown	Unknown	
Northampton	Northampton-based vendor - \$50 flat Out of Town Vendor - \$100 flat	N/A	\$50 \$100	
Wayland	\$30 covers the full 14 days	N/A	\$30	All these are run through one regional health inspector. He states that although there is not cap, the office staff would encourage those who have higher permit costs (Uxbridge, Northbridge, and Mendon) to apply for a seasonal vendor licenses since it would likely be cheaper.
Upton	\$20/day	No	\$180	
Uxbridge	\$50/day	No	\$450	
Northbridge	\$50/day	No	\$450	
Douglas	\$35/day	No	\$315	
Blackstone	\$25/day	No	\$225	
Mendon	\$50/day	No	\$450	
Hopedale	\$25/day	No	\$225	
Salem	\$35 for 1-3 days \$70 for 4-7 days \$10/day for each additional day after 7	No	\$90	
Salisbury	For 1-3 day event, \$50 permit fee plus \$70 inspection fee	N/A	\$130	
Sudbury	\$10 for 1-3 days Seasonal Permit is \$50	No	\$50	
Topsfield	\$50 for 1-3 days \$20 for each additional day	No	\$170	
Marshfield	\$15/day for early application \$25/day for regular application	No	\$135 \$225	
Abington	\$50 for temp event \$75 for seasonal permit	N/A	\$75	
Andover	\$50 covers the whole permit for up to 14 days - not a daily charge	N/A	\$50	
Acton	\$60	No	Varies, see notes	Depending on the business/event it could be between \$90-120 for the event
Agawam	\$25/day	No	\$225	
Auburn	\$50 covers the whole permit for up to 14 days - not a daily charge	N/A	\$50	Could be circumstantial depending on the event/business. Large events may result in tweaking the permit prices/regulations
Arlington	\$25 for up to four days	Unknown	Varies, see notes	Typically do not have events that last longer than 4 days so they may need to reform rules depending on the event/capacity.
Canton	\$25 for temp event \$60 for seasonal vendors		\$60	Encourage vendors to just get the seasonal vendor permit
Charlton	\$35 for 1-4 days	N/A		Don't have many multi day events
Chatham	\$35 for temp event	N/A		Don't have many multi day events
Chelmsford	\$50	N/A		Most events are only one day and if they have a 2-day event, they would only charge \$50
Chelsea	\$50	N/A		
Cohasset	\$40	N/A		
Concord	\$35 covers 14 days for a limited or approved prep of PHF \$100 covers 14 days for PHF	N/A	\$35 \$100	