Notice of Intent to Operate or Relocate a Personal Service Premise

It is your legal obligation under Ontario Regulation 136/18 - Personal Services Settings to notify the Northwestern Health unit at least 14 days prior to the commencement of operation of a new Personal Service business. It is also your legal obligation to notify Northwestern Health Unit at least 14 days prior to relocating your business.

Information about new business or new location:

Business Name:		
Site Address:		
Mailing Address:		
Owner Name:		
Operator Name:		
Phone #:	Business:	Home:
•	current personal services busines he name and address of your current bus	
Business Name:		
Business Address:		
	ls, microblading, shaving, hot stone massa	
Water Supply (munic	:ipal/private):	
. ,	• • •	
•	•	
Proposed date of op	ening:	
Owner/Operator Sigi	nature:	Date:
Please submit by e-r Health Unit office:	nail to <u>ehfax@nwhu.on.ca</u> , by fax,	or to a Public Health Inspector at your closest Northwestern

Fort Frances Dryden Kenora

210 First Street North 75D Van Horne Ave. 396 Scott Street Fax: (807) 468-3914 Fax: (807) 274-0779 Fax: (807) 223-5754

Personal information is collected under the authority of the Health Protection and Promotion Act and related legislation and in accordance with the Personal Health Information Protection Act and/or the (Municipal) Freedom of Information and Protection of Privacy Act. We collect only the personal information needed to provide public health programs and to plan and evaluate our services. Your information may be shared with others as required or permitted by law. For more information contact the health unit at 800-830-5978 or see the privacy statement on our web-site at www.nwhu.on.ca.



