COUNTY OF LOS ANGELES - PUBLIC HEALTH
ENVIRONMENTAL HEALTH
GARMENT / BODY ART INSPECTION PROGRAM
5050 Commerce Dr, Baldwin Park, CA 91706
Telephone: (626) 430-5570/ Fax: (626) 962-1805

REQUEST TO DELETE / CLOSE ENTIRE ACCOUNT

Date: _____ PR# _____

Name of Owner (individual/ corporation: _____

Name of Business (DBA): _____

Business Address: _____ Room / Unit #: _____

City: _____ Zip Code: _____ Phone #: ( ) _____

☐ Provide a legible copy of Owner Driver License/Identification.

State reason of closure: _____

_____

Business closed as of: _____

I hereby swear, under penalty of perjury, that the foregoing statements are true and correct. I understand that ANY MISREPRESENTATION IS GROUNDS FOR DENIAL OR REVOCATION OF THIS REQUEST FOR DELETION.

_____ _____ _____
Print Name & Position of Requestor Signature Date

Alternate mailing address : _____

Tel. No:_____ E-mail address: _____

DEPARTMENTAL USE ONLY

SUB DISTRICT	EHS	FA #	PR#	VERIFIED BY	DATE

Revised on 3/4/16