



525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • [www.dph.illinois.gov](http://www.dph.illinois.gov)

Dear Tanning Facility Owner/Operator:

This information includes several items for your review and for use at your tanning facility. Enclosed please find the following:

**A Tanning Facility Permit Application and Instructions**

All blanks must be filled in completely, all three attachments must be included, and the \$250 non-refundable initial permit fee must be received by the Illinois Department of Public Health before the process can begin. Refer to the application instructions if you have any questions. Upon completion of the review process an inspector will contact you to set up the opening inspection. **Please allow at least four weeks for this application process.**

**A copy of the Illinois Tanning Facility Program Legal Base**

This document contains current versions of the Illinois Tanning Facility Permit Act (the state law establishing the tanning facility inspection program), the Tanning Facilities Code (the rules adopted by the Department to implement the act) and excerpts from other pertinent state laws.

**Tanning Facility Written Operating Procedures Outline**

This outline details the minimum types of items expected in a tanning facility's written operating procedures manual. Tanning facilities are required to prepare an operating procedures manual and include a copy with their permit application.

**Tanning Facility Record Requirements**

There are several types of tanning facility records required throughout the act and the code. This document concisely details all of the types of the records for your convenience.

**Tanning Facility "Self-Inspection" Form**

To assist the tanning facility owner in determining whether his/her establishment is in compliance with the Act and the code, this "self-inspection" form has been prepared. Use of this form is not mandatory. However, it can be very helpful in pointing out items of noncompliance in advance of an inspection by the Illinois Department of Public Health or your local health department.

Questions concerning these items may be directed to the Illinois Department of Public Health, Division of Food, Drugs and Dairies, 525 W. Jefferson St., Springfield, IL 62761, telephone 217-785-2439, fax 217-782-0943, TTY (hearing impaired use only) 800-547-0466, or by email [dph.tan@illinois.gov](mailto:dph.tan@illinois.gov).

Melissa Estes, Tanning Program Coordinator  
Division of Food, Drugs and Dairies  
Illinois Department of Public Health

Rev. 7-2015

Date received by IDPH	Illinois Department of Public Health Division of Food, Drugs and Dairies 525 W Jefferson St. Springfield, IL 62761-00 Phone 217-785-2439 TTY (hearing impaired use only) 800-547-0466 FAX 217-782-0943 EMAIL dph.tan@illinois.gov	For IDPH use only Permit ID # _____ Region _____ LHD _____
-----------------------	--	--

IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 87-636. Disclosure of this information is mandatory.

## TANNING FACILITY PERMIT APPLICATION

**TYPE OF APPLICATION:**     New Facility     Change of Ownership     \*\* Change of Location

\*\* If change of location, list previous facility address \_\_\_\_\_

Tentative date of opening/change of ownership \_\_\_\_\_

Facility Name \_\_\_\_\_ County \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP code \_\_\_\_\_

Telephone (    ) \_\_\_\_\_ Email \_\_\_\_\_

**Facility Mailing Address IF different from above**

**Address** \_\_\_\_\_

**City/State** \_\_\_\_\_ **ZIP code** \_\_\_\_\_

Applicant (Owner) Name \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ ZIP code \_\_\_\_\_

Telephone (    ) \_\_\_\_\_ Email \_\_\_\_\_

Primary Operation of Facility     Tanning Facility     Health Club     Hotel/Motel     Beauty Salon  
     Barber Shop     Residence     Other (Specify) \_\_\_\_\_

Days and hours of facility operation \_\_\_\_\_

PLEASE PROVIDE COMPLETE INFORMATION FOR EACH PIECE OF TANNING EQUIPMENT IN THIS FACILITY.

Types of equipment include bed canopy, bed bench, stand-up booth, free-standing facial unit and free-standing canopy.

Room I.D.	Manufacturer	Model	Serial Number(s)	Year of Manufacture	Type of Equipment
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

(ATTACH ADDITIONAL SHEET[S] IF MORE EQUIPMENT INFORMATION IS TO BE PROVIDED.)

**APPLICATION CONTINUED ON REVERSE SIDE**

Type of Ownership (**MARK ONLY ONE**)

**Sole Proprietor** (Name and Social Security number) \_\_\_\_\_  
\_\_\_\_\_

**Partnership/Multiple owners** (List name and Social Security number of each owner) \_\_\_\_\_  
\_\_\_\_\_

**Limited Liability Company** (List complete name of LLC and FEIN ) \_\_\_\_\_  
\_\_\_\_\_

**Corporation** (List complete name of Corp and FEIN ) \_\_\_\_\_  
\_\_\_\_\_

**List the Registered Agent** on file with the Secretary of State IF either an **LLC or Corporation** is marked.

▶ **Submit:**

The facility generated ***Operating Procedures*** using the provided outline.

*(All points on provided outline must be addressed to be considered complete.)*

I, \_\_\_\_\_ affirm that I am the \_\_\_\_\_  
(full name) (owner, partner, officer of corporation)

of the \_\_\_\_\_, that I am authorized on the part of said applicant to  
(firm name as shown on page one)

verify and file with the Illinois Department of Public Health this application, that I have full knowledge of the matters set forth herein and that all of same are true in substance and fact.

(X) \_\_\_\_\_

**(Signature required)**

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED AND  
WILL BE RETURNED FOR REQUIRED INFORMATION.**

Submit a check or money order for the non-refundable \$250 application fee, the fully completed application, and the facility's written operating procedures.

**MAIL TO:** Illinois Department of Public Health  
Division of Food, Drugs and Dairies  
525 W. Jefferson St.  
Springfield, IL 62761

# TANNING FACILITY PERMIT APPLICATION INSTRUCTIONS

- 1 Mark the appropriate box to designate the type of application.
- 2 Print the address of the previous facility if application is for a change of location.
- 3 Print the date the facility wishes or is scheduled to open, change ownership or change location.
- 4 Print the full, correct facility name as you wish it to be known.
- 5 Print the name of the county where the facility is located.
- 6 Print the street address (including unit/suite number) where the facility is located. (Do not list a P.O. Box.)
- 7 Print the city where the facility is located.
- 8 Print the ZIP code.
- 9 Print the facility phone number.
- 10 Print the email address, if one is available.
- 11 Print the mailing address, if different from the facility address.
- 12 Print the city and state of the facility mailing address.
- 13 Print the ZIP code of the facility mailing address.
- 14 Print the facility owner's name. (This could be an individual, partnership or corporate name).
- 15 Print the facility owner's home address or partnership/corporation headquarters. (Do not list a P.O. Box.)
- 16 Print the facility owner's home/headquarters city and state.
- 17 Print the facility owner's home/headquarters ZIP code.
- 18 Print the facility owner's home/headquarters telephone number.
- 19 Print the facility owner's home/headquarters email address, if one is available.
- 20 Mark an X in the appropriate box to describe the primary type of business at the facility address.  
(If other is marked, describe the primary type of business.)
- 21 Print the days of the week the facility will be open and the hours for each day.
- 22 Print the room number or other identifier for each room containing a tanning unit.
- 23 Print the name of the manufacturer for each tanning unit.
- 24 Print the model name or number for each tanning unit.
- 25 Print the serial number(s) for each tanning unit.  
(Note that component parts of tanning units may have separate serial numbers.)
- 26 Print the year the tanning unit was manufactured.
- 27 Print the description of the type of tanning equipment.  
(i.e., bed, bench, canopy, booth, free standing facial unit)

*GO TO PAGE TWO OF THE APPLICATION*

- 28 Mark an X in the box ONLY if the facility is owned by an individual.
- 29 Print the owner's Social Security number.
- 30 Mark an X in the box ONLY if the facility is owned by a partnership.
- 31 Print the names of all partners, their individual addresses, and Social Security number for each.
- 32 Mark an X in the box ONLY if the facility is owned by a (LLC) Limited Liability Corporation.
- 33 Print the exact name of the Limited Liability Corporation and Federal Employee Identification Number.
- 34 Mark an X in the box ONLY if the facility is owned by a Corporation.
- 35 Print the exact name of the Corporation and Federal Employee Identification Number.
- 36 Print the name and address of the registered agent for the LLC or Corporation as on file with the Secretary of State.
- 37 **Create the facility operating procedures using the IDPH provided memo, "Tanning Facility Written Operating Procedures Outline."**
- 38 Print the name of the person preparing the application.
- 39 Print the title of the person preparing the application.
- 40 Print the name of the tanning facility as shown on the front side of the application.
- 41 A personal, handwritten signature is required.

**The complete application includes:**

- 1. A check or money order for the non-refundable permit fee of \$250**
- 2. A copy of the facility written operating procedures**
- 3. The tanning facility permit application with both sides completed**

**Mail to: Illinois Department of Public Health  
Division of Food, Drugs and Dairies  
525 W. Jefferson St.  
Springfield, IL 62761**

If the facility should change anything that would make the application information incorrect, (such as new hours, new phone number, etc.), the new information should be put in writing and sent to the Illinois Department of Public Health. If you have questions concerning these instructions, or the program requirements, please contact the tanning facility program staff at 217-785-2439, TTY (hearing impaired use only) 800-547-0466, Fax 217-782-0943, or email [dph.tan@illinois.gov](mailto:dph.tan@illinois.gov).

**Illinois Department of Public Health**  
**TANNING FACILITY WRITTEN OPERATING PROCEDURES OUTLINE**

The Tanning Facility Permit Act [210 ILCS 145/1], Section 10(a)(5), requires all tanning facilities to submit a written copy of their “operating procedures to be used in the facility” as an attachment to the facility’s application for a tanning facility permit. The purpose of written operating procedures is to establish uniformity among all trained operators and to provide a list of what must be done to ensure compliance with the Act. The following outline highlights the areas each facility **must** minimally address in its tanning facility written operating procedures.

- 1     *The procedure for annually giving the client a copy of the required written warning, as detailed at Section 795.150(a) of the Tanning Facilities Code [page 33 of the Legal Base booklet]. What procedure is the operator expected to follow to ensure that all clients are at least annually offered a written copy of the warning?*
- 2     *The procedure for proving and documenting whether the client is 18 years of age or over and able to tan on their own. What method is the operator to use to prove and document the identity and age of the client? How do you document the results of your verification?*
- 3     *The procedure the facility follows to handle the presence of children that accompany a client. How are operators expected to handle the presence of children who accompany a client while the client is tanning?*
- 4     *The procedure the operator must follow to obtain client information on prescription and nonprescription medications, consumed or used prior to the start of each tanning session, and the procedure for informing clients about photosensitizing substances. What is the method the operator follows to personally ask the client to update information on Rx and OTC medications prior to each tanning session?*
- 5     *The facility procedure for dealing with pregnant women who wish to tan. What is your facility’s policy related to pregnant or potentially pregnant women who wish to tan? What do you want your operators to do when a pregnant client comes to tan?*
- 6     *The operators’ method for ensuring and documenting that clients have not used the services of any tanning facility in the preceding twenty-four hours. What does the operator do to verify that the client has not tanned within the last 24 hours? What questions does the operator personally ask the client?*
- 7     *The system for maintaining complete and accurate records on clients’ use of the tanning facility. What information is collected, and in what format, at each client’s tanning session? When maintained electronically, the procedures shall describe data storage and back-up methods.*
- 8     *The operators’ procedures for instructing clients on how to use the tanning equipment. Each tanning unit has specific manufacturer’s instructions for use. How do you ensure that operators cover all necessary information for each tanning unit?*
- 9     *The procedure for determining and recording the client’s appropriate skin type, using the IDPH-provided skin type chart. What happens after the client calculates their skin type? What is the operator expected to do with the client’s skin type information? How is the exposure time of the client for any specific session to be determined?*
- 10    *The procedure for thoroughly documenting and promptly reporting tanning injuries, as specified in the Tanning Facilities Code, Section 795.200. What information pertaining to the injury is to be collected? What is the operator to do with the information after it is collected?*

- 11 *The procedures for conducting regularly scheduled maintenance of the tanning equipment, particularly as required by the manufacturer of each tanning unit. Describe the various maintenance procedures to be conducted on each unit, (such as: removal and cleaning of acrylic shield and lamps, and cleaning of reflectors). Who has responsibility for the maintenance procedures?*
- 12 *Procedures for the accurate preparation of the facility's sanitizing solution and a description of how it is to be tested. Sanitizing solution must be accurately prepared and tested at least once a day to ensure proper concentration and stored in properly labeled containers. What sanitizing solution do you use? Provide step-by-step instructions to the operator.*
- 13 *A thorough description of equipment cleaning procedures. Facility operators, NOT CLIENTS, are responsible for cleaning and sanitizing tanning equipment after each use. Explain exactly what and how you expect your operators to clean and sanitize.*
- 14 *A thorough description of eyewear sanitizing procedures (if the facility provides reusable eyewear for its clients). What kind of eyewear sanitizing solution is used in your facility? If a concentrate, what are the directions for mixing? How is the solution to be tested? Provide step-by-step instructions to the operator.*
- 15 *The procedure for cleaning and sanitizing the restroom (and shower area, if provided). The facility's restroom(s) must be cleaned and sanitized at least once a day. Describe the specific tasks to be conducted and who has responsibility for each task?*
- 16 *A thorough description of the procedures for the general cleaning of the tanning facility. Describe the various procedures for general cleaning of the tanning facility. Who has responsibility for the cleaning procedures?*
- 17 *The procedures for the operator to perform while assisting the inspector during an Inspection. The operator must have access to all information required by the inspector including (but not limited to) the client records, the operators' training records, the user manual for each piece of tanning equipment, and the compatibility documentation for lamp replacement.*
- 18 *A thorough description of the training method (the 'what' and 'how') to be used for each operator, covering the ten areas described in Section 795.180 of the Tanning Facilities Code. Operators may not be left unattended until training is completed.*

IF ANY OF THE ABOVE ITEMS ARE NOT COVERED IN THE FACILITY'S WRITTEN OPERATING PROCEDURES PROVIDED TO THE DEPARTMENT, THEY WILL BE RETURNED TO THE FACILITY OWNER TO COMPLETE OR CORRECT. PLEASE REVIEW CAREFULLY BEFORE MAILING. REMEMBER TO KEEP AT LEAST ONE COPY OF THE PROCEDURES AT THE FACILITY TO INCLUDE IN THE TRAINING MANUAL.

**Questions may be directed to the Tanning Program Staff:**

Illinois Department of Public Health  
Division of Food, Drugs and Dairies  
525 West Jefferson Street  
Springfield, IL 62761  
217-785-2439,  
TTY (for hearing-impaired use, only) 800-547-0466.  
FAX 217-782-0943  
Email [dph.tan@illinois.gov](mailto:dph.tan@illinois.gov)

# **Illinois Department of Public Health**

## **TANNING FACILITY RECORD REQUIREMENTS**

The Tanning Facility Permit Act and the Tanning Facilities Code require many types of records to be maintained by a salon. The following summarizes the types of information the salon must maintain.

### **Equipment Log**

Section 795.100(c) of the code requires tanning facilities to maintain a log. For completeness, the log should identify -- by model number, serial number and location (room number) -- the following information: date of lamp replacement; name of manufacturer and model number of replacement lamps; and quantity of lamps replaced (if all lamps are not replaced, the log should accurately describe how the old or new lamps may be identified in the tanning equipment).

### **Injury Reports**

Section 795.200 requires the salon to prepare a written report within 10 working days of the occurrence or knowledge of any tanning injury. An injury is defined as any circumstance or incident, resulting from the use of a tanning device that prompts the client to seek medical attention. The written report must include the name of the affected individual; the date of the injury; the identification (by name of manufacturer, model number and serial number) of the tanning unit involved; the name, address and permit number of the tanning salon involved; a description of the nature of the injury; the name and address of the individual's health care provider, if any; and any other information considered relevant to the situation. The salon should also indicate when and how it became aware of the injury.

### **Operator Training**

Section 795.180(a) requires salon operators to prove they have received training in 10 areas. The Department does not endorse or approve any private provider of tanning operator training. Salon owners should also note that no private provider of operator training is able to meet 100 percent of the 10 training requirements. For example, the salon owner alone would have to develop and provide operator training in areas such as procedures for the correct operation of the individual tanning salon; the salon's procedures for recognizing and handling tanning injuries; tanning salon emergency procedures; and, the manufacturers' procedures for the operation and maintenance of equipment used in the salon. Most private training courses will not cover the Illinois Tanning Facility Permit Act and the Tanning Facilities Code. All owners and operators must read the act and the code as part of their training. Inspectors will ask to see a list of operators who have received training, date(s) of training, hours spent in training and specific materials used in training. They will compare this to the facility's list of all employed tanning operators.

## **Client Records**

Section 795.190(a) requires each client to be given a written warning about the risks associated with tanning at their initial salon visit and at least annually thereafter. The language that must be contained in the written warning is found at Section 795.150(a). It is essentially the same language found on the warning poster provided by the Department on the website [www.dph.illinois.gov](http://www.dph.illinois.gov).

If the client is visually handicapped or otherwise unable to read or understand the warning statement, the salon operator must read the warning to the client in the presence of a witness. The warning statement must then be signed by the operator and the witness indicating that the warning has been read to the client. It is advisable that the client be given a copy of the written warning and the facility maintains a copy for its records.

Section 795.190(b) specifies that each client must fill out a form specifying any and all prescription (Rx) and nonprescription (OTC) medications he/she is currently using. *(This requirement is taken directly from Section 25(a) of the act.)* This section also directs the client to list any cosmetics and toiletries (including tanning accelerators) he/she may have applied prior to using the tanning salon. This information is to be confidentially maintained as a permanent salon record (for at least five years). Salon clients **MUST** be given an opportunity to update this information prior to beginning each tanning session.

Additionally, this section requires the client to certify that he/she has not used the services of a tanning facility within the immediately preceding 24 hours. Inspectors will verify that salons have a method of certifying clients' compliance with this requirement.

Section 795.190(c) states that tanning salons shall not allow individuals younger than 18 years of age to tan for any reason. Age is verified with a government issued ID. Minors that request access due to medical conditions and have "Notes" from Physicians shall be denied access and referred back to the Physician

Section 795.190(d) details client attendance records that must be maintained by the salon. The tanning facility must keep a record noting the date and duration (in number of minutes) of each client visit. This record should also note the time of day the tanning session occurred in order to verify the client has not tanned within the preceding 24 hours. The record must also identify the specific tanning unit used by the client. Identification by room number is sufficient, provided the salon can identify the model and serial number of the equipment by reviewing the equipment log. The facility owner must maintain these client exposure records for up to five years past the termination of the salon's business.

Section 795.180(e) requires operators to limit a client's exposure to the maximum recommended exposure time as recommended by the manufacturer of the tanning unit the client uses, taking the client's skin type into consideration. All clients must determine their skin type, using the procedures described in appendices A and B of the code and salons must have a method of documenting the client's calculated skin type on the facility's client record.

# Illinois Department of Public Health

## TANNING FACILITIES "SELF-INSPECTION" FORM

This list has been prepared to assist in conducting a "self-inspection" of tanning facilities. It outlines the MAJOR requirements of the Tanning Facility Permit Act and the Tanning Facilities Code. The items on this list do **NOT** include all of the requirements of the act and the code. Rather, it merely summarizes some of the most critical items on which you should focus your attention.

If you have additional questions or need assistance, please first refer to the act and the code, or contact the Illinois Department of Public Health, Division of Food, Drugs and Dairies, telephone 217-785-2439; TTY (*hearing impaired use only*) 800-547-0466, fax 217-782-0943, or by email, [dph.tan@illinois.gov](mailto:dph.tan@illinois.gov).

- Application for a "Tanning Facility Permit" must be fully completed with all required enclosures and submit to the Illinois Department of Public Health. (All future changes to information noted on the application form must be reported by owner in writing to the Department of Public Health.)
- Tanning units must be in compliance with all applicable federal standards. Permanently affixed, legible, accessible label(s) with name, and city of manufacturer; year of manufacture; certification of compliance with 21 CFR 1040.20 [also known as the "federal performance standard"]; required warning label; recommended exposure positions; recommended exposure schedule including duration and spacing of sequential exposures, and maximum exposure time in minutes; designation of UV lamp type to be used in the unit; and statement of time expected before results appear shall be on the unit.
- The lamps in the tanning units must be the "recommended equipment type" specified for that unit by the manufacturer (as noted on the label affixed to the tanning unit and the user manual that was originally supplied by the manufacturer of the unit) OR the operator has literature that indicates the installed replacement lamp is certified as equivalent/compatible to the recommended equipment lamp. It is strongly recommended that UV lamps be installed with the lamp designation clearly visible. **Inspectors may require that facilities remove acrylic or other barriers to verify the lamp model number if such information is not in view.**
- The timer must not allow the tanning unit to be operated, for periods of time greater than the maximum recommended exposure schedule with a single setting of the timer. The timer does not have an error greater than plus or minus 10 percent of any timer interval setting for the unit. *For example, if the timer is set for 10 minutes, the timer may not have an error greater than one minute (which means the timer does not run for more than 11 minutes or less than nine minutes).*
- If the timer is stopped for any reason, it cannot be automatically reset to run for more than the unused portion of the timer cycle originally programmed for the user.
- Customers may not be allowed to use the equipment more than the maximum recommended exposure time or to use the equipment within 24 hours of previous use of tanning equipment.
- Protective eyewear must be available to all customers. The facility must have documentation to prove that the protective eyewear is compliant with federal regulations (21 CFR 1040.20). The operator must inform each consumer that use of protective eyewear is required, and may not allow individuals to tan if they indicate they will not use the protective eyewear.

- Reusable eyewear, **if** provided by the tanning facility, must be properly sanitized between uses. The facility operator must use a test kit for the sanitizing solution that is approved by the U.S. Environmental Protection Agency. All sanitizing solution containers should be marked accurately and clearly with the name of the sanitizing solution and its strength.
- There must be a trained operator present at the facility at all times during operating hours. Training must minimally cover each of the 10 areas specified in the Tanning Facilities Code: 795.180 a). The facility must also maintain documentation to identify trained operators and the specific materials used in training.
- Units must have a physical barrier, such as acrylic shield, wire grid or mesh, to protect tanners from contact with falling lamps.
- Each unit must have a control available for the customer to manually terminate the tanning session while the customer is lying or standing in the proper tanning position, without having to pull an electrical cord from a wall socket or otherwise coming in contact with the lamps.
- Tanning booths must have handrails, non-slip floors and instructions to indicate proper tanning distance.
- Telephone numbers listing the fire department and emergency medical service (or 911 if available), as well as, the nearest hospital must be posted close to the phone.
- List of common photosensitizing agents must be available for use by customers. This may be obtained from the internet or local pharmacist.
- Customers must sign and receive a copy of the specified written statement of warning at least once a year.
- Customers must fill out and update confidentially maintained records of prescription and over-the-counter medications, cosmetics and toiletries at **EACH** tanning session.
- Facility must maintain a record of each customer's tanning sessions, noting calculated skin type, date, time and duration of visits, and identification of specific piece(s) of tanning equipment used.
- Facility must provide access to drinking water, cloth or paper towels and toilet facilities.
- Operator (NOT the consumer) must sanitize all surfaces of tanning devices that may come in contact with users between tanning sessions.
- Computer records of tanning session information must be backed-up at least monthly on media other than the hard drive of the facility's computer.
- Facility's advertising and promotional materials may make no reference to "safety" or "health." Such materials also may make no reference to receipt of a tanning facility permit or inspection by the Department of Public Health or its agents.
- Rooms with tanning equipment in tanning facilities must use a wall to wall flooring surface that is nonabsorbent and easily cleanable. Carpeting is not allowed.