

TANNING FACILITY INJURY REPORT

Chapter 64E-17.004(8), Florida Administrative Code states that a written report of any alleged tanning injury shall be forwarded to the county health department which issued the license within five working days of its occurrence or knowledge thereof.

Date ____/____/____

Tanning Facility Information

Name of Tanning Facility _____ License Number _____

Address _____ City _____ County _____

Owner's Name _____ Phone Number _____

Salon Employee/Operator who assisted client _____

Tanning device Manufacturer _____

Model Number _____ Serial Number _____

Types of Lamps Used in Device _____

Customer Information

Date of Injury _____

Reported by _____ Phone Number _____

Name of Injured Individual _____ Phone Number _____

Address _____

Nature of Injury _____

Duration of Tanning Exposure _____

Medical Attention ____ Yes ____ No

Physician Name _____ Phone _____

Address _____

Diagnosis/Treatment _____

Name of Person taking Complaint _____ Date _____

Name of Facility Operator _____ Date _____

CHD Inspector _____ Date _____

__OKALOOSA__ County Health Department Environmental Health Program

