



CITY OF DANA POINT

COMMUNITY DEVELOPMENT, CODE ENFORCEMENT DIVISION

MESSAGE ESTABLISHMENT PERMIT APPLICATION¹

Applicant General Information

E-Mail Address _____

Name: _____

Driver's license number: _____

Home Address: _____

Applicant's height: _____

Applicant's weight: _____

Telephone number: _____

Applicant's eye color: _____

Social Security Number: _____

Applicant's hair color: _____

Applicant's Place of Birth: _____

Applicant's Date of Birth: _____

Name and Location of Massage Establishment:

Do you currently have a valid massage establishment license or massage parlor license from the City of Dana Point?

Yes, License # _____ No

Is this an application for renewal of your current massage establishment license or massage parlor license?

Yes No

If you answered "yes" to the two previous questions, on what date does your existing massage establishment or massage parlor permit from the city of Dana Point expire? _____

Previous addresses of the applicant for the last five years:

If applicant is a corporation, state the name of the corporation exactly as shown on the articles of incorporation. List the name and home addresses of each of the corporation's officers, directors, and stockholders holding more than five percent of the stock, along with the amount of stock held. Attach additional sheets of paper if necessary.

¹ This application is for a massage establishment permit only. If this application is granted, the applicant must still comply with all applicable City building and zoning regulations before the massage establishment may open for business in the City of Dana Point.

If applicant is a partnership, state the name and home address of each of the partners, including limited partners. If one or more of the partners is a corporation, also provide the information required above for corporations. Attach additional sheets of paper if necessary.

Previous Experience In Operation Of Massage Establishments

Indicate any previous experience by the applicant in operating and/or working at massage establishments or similar businesses in the five years preceding the date of this application. Attach additional sheets of paper if necessary.

Proposed Employees Of Massage Establishment

List the names and home addresses of all persons intended to be employed at the massage establishment. List the proposed or actual nature of the work of each employee. For purposes of this application, "employee" includes every owner, partner, manager, supervisor and worker (whether paid or unpaid) who renders personal services of any nature at the massage establishment. Attach additional sheets of paper if necessary. (Individuals who will be providing massages at a massage establishment must apply separately for a massage practitioner or massage technician license from the City of Dana Point.)

<i>Full Name</i>	<i>Home Address</i>	<i>Nature of Work</i>
_____	- _____	_____
_____	- _____	_____
_____	- _____	_____
_____	- _____	_____
_____	- _____	_____
_____	- _____	_____

Note: Any applicant or licensee shall notify the City in writing within five days of hiring any new employee and forward that employee's name, home address, nature of work and two passport-size photographs of that employee to the City. A massage establishment may not employ an individual to provide massage services until such individual has been licensed by the City to provide such services.

Nature of Services to be Offered

Indicate the exact nature of the treatments to be administered. Attach additional sheets of paper if necessary.

Applicant Background Check

Within the last five years, has the applicant, or any owner, partner, manager, supervisor or stockholder of applicant, been convicted or arrested for any of the following:

- Yes No A misdemeanor or felony offense which relates directly to the operation of a massage establishment, whether as a massage establishment owner or operator, or as a massage technician or massage practitioner.
- Yes No A felony which occurred on the premises of a massage establishment.
- Yes No Pimping, pandering, keeping or residing in house of ill-fame, keeping disorderly house, or prevailing upon person to visit place for gambling or prostitution (Section 266(h), 266(i), 315, 316, 318 or subdivision (b) of Section 647 of the California Penal Code).
- Yes No Conspiracy of attempt to commit pimping, pandering, keeping or residing in house of ill-fame, keeping disorderly house, prevailing upon person to visit place for gambling or prostitution (Section 266(h), 266(i), 315, 316, 318 or subdivision (b) of Section 647 of the California Penal Code).
- Yes No An offense in a jurisdiction outside of the State of California which is equivalent to Section 266(h), 266(i), 315, 316, 318 or subdivision (b) of Section 647 of the California Penal Code.
- Yes No A felony offense involving the sale of a controlled substance specified in Section 11054, 11055, 11057 or 11058 of the California Health and Safety Code.
- Yes No Within the last five years, has the applicant, or any owner, partner, manager, supervisor or stockholder of the applicant, engaged in conduct which would constitute an offense as described in the previous six statements?
- Yes No Within the last five years, has the applicant had any massage establishment, operator, technician, practitioner or trainee license or permit issued by the State of California or any county or city revoked?
- Yes No If applicant is a corporation, within the past five years, has the applicant or any stockholder of applicant had a massage establishment or operator, technician, practitioner or trainee license or permit issued in the State of California or any county or city revoked?
- Yes No If applicant is a partnership, within the past five years, has any partner of the partnership owning applicant had any massage establishment, operator, technician, practitioner or trainee license or permit issued by the State of California or any county or city revoked?
- Yes No Is the applicant or any owner, partner, manager, supervisor or stockholder of the applicant required to register under the provisions of Section 290 of the California Penal Code, Registration of Sex Offenders?
- Yes No Has the applicant or any owner, partner, manager, supervisor or stockholder of the applicant been subjected to a permanent injunction against conducting or maintaining a nuisance pursuant to Sections 11225 through 11235 of the California Penal Code, Red Light Abatement Law, or similar provisions of law in a jurisdiction outside of the State of California?

If the applicant checked yes to any of the above statements under "Applicant Background Check," please explain the circumstances. Attach additional sheets of paper, if necessary, to thoroughly explain.

Employment Information

Applicant's employment history for the last five years (attach additional sheets of paper if necessary)

Dates employed: _____ Dates employed: _____

Name of establishment: _____ Name of establishment: _____

Address: _____ Address: _____

Telephone number: _____ Telephone number: _____

Documents To Be Submitted

The following documents must be submitted with the completed application. (Check the corresponding box to indicate that the document is attached.)

- Written proof (copy of driver's license, state issued identification card or passport) that the applicant is at least 18 years of age.
- A scheduled appointment with the Orange County Sheriff's Department for fingerprinting. Appointments may be scheduled by calling 714/647-1868. Appointment date and time: _____
- Four prints of a recent passport-size photograph of applicant.
- A notarized statement signed by the property owner consenting to the operation by the applicant of the massage establishment at the location and a copy of the lease
- Check or money order in the amount of \$42.00 made payable to: **City of Dana Point**. Remainder of fees \$406.00 (**payable to the Orange County Sheriff-Coroner**) will be required prior to the issuance of the license.

Certification

I, _____, certify under penalty of perjury that the information furnished in this application and documents submitted are true and correct. I also authorize the City and its agents and employees to seek information and conduct an investigation into the truth of the statements set forth in this application and my qualifications for this license.

Signature of applicant attesting to the above statement: _____

Date: _____

FOR OFFICE USE ONLY	License # _____
Zoning Clearance For The Noted Location Has Been:	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Signature: _____	Date: _____