

**CITY OF WEST ST. PAUL
 MESSAGE THERAPY BUSINESS LICENSE APPLICATION**

City Code Section 1165.03 – Any person desiring a personal service license shall file a written application with the City Clerk. The applicant shall tender with the application the correct license fee and shall, in addition furnish the following:

1. Please list type of ownership of the business, whether individual, partnership, corporation or otherwise.

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2. Please list name and designation under which the business or practice is to be conducted.

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3. Please list the business address and all telephone numbers where the service is to be practiced or based.

<u>Business Address</u>	<u>Phone</u>

4. Please list names and residence addresses of all employees in the business and the name and residence addresses of the managers or other persons principally in charge of the operation of the business. (Use additional sheet of paper if necessary)

<u>Name</u>	<u>Residence Address</u>

5. Please list the following personal information concerning the applicant, if an individual; and concerning each stockholder holding more than 5% of the stock of the corporation, each officer and each director, if the applicant is a corporation; and concerning the partners, including limited partners, if the applicant is a partnership; and concerning the manager or other person principally in charge of the operation of the business. (Use additional sheet of paper if necessary)
 - a. Name, complete residence address and residence telephone number.

<u>Name</u>	<u>Residence Address</u>	<u>Phone</u>

- b. The massage or similar business history and experience, including but not limited to whether or not such person in previously operating in this or another city or state under license or permit has had such license or permit denied, revoked or suspended and the reason therefor, and the business activities or occupations subsequent to such action of denial, suspension or revocation.

- c. All criminal convictions or arrests of applicant other than misdemeanor traffic violations, fully disclosing the jurisdiction in which convicted or arrested; and the offense for which convicted or arrested and the circumstances thereof.

I duly declare under penalty of perjury that the foregoing information contained in this application is true and correct, said declaration being dated and signed in the City.

Applicant's Signature

Date