



# Massage Establishment PERMIT RENEWAL

<b>Official Use Only</b>	
Background check completed by _____	
Date _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied

Petaluma Municipal Code 8.38.110: (A)...all massage permits shall expire on June 30th of the second year following issuance or renewal. Application for renewal of a massage permit shall be made at least thirty days before its expiration...(B) The massage permit renewal application must be accompanied by a renewal fee...No part of renewal fee will be refundable.

MASSAGE ESTABLISHMENT	
Legal Business Name _____	
Form of Business (ie: sole proprietorship, corporation, general partnership) _____	
Business Address _____	
Primary Phone Number _____	Alternate Phone Number _____
Other business to be operated on the same premises _____	
Name and address of owner/lessor of the real property _____	
OWNER/PARTNER/RESPONSIBLE MANAGING OFFICERS	
If the business is a partnership, list each of the partners below; additional space provided on back. If the business is a corporation, its responsible managing officer shall complete this application.	
Legal Name _____	CAMTC Number _____
Residence Address _____	
Primary Phone Number _____	Alternate Phone Number _____
<input type="checkbox"/> A copy of a valid, current driver license or picture identification bearing a bona fide seal issued by a state, federal government agency or foreign government is attached.	
<input type="checkbox"/> A copy of the valid, unexpired and unrevoked CAMTC certificate is attached. If not CAMTC certified, a copy of the City of Petaluma massage permit is attached (PMC 8.38.110).	
MASSAGE PRACTITIONERS	
All persons practicing massage therapy at this establishment must possess current CAMTC certification or have a valid massage professional permit with the City of Petaluma (PMC 8.38.050). List all practitioners below and submit copies of all CAMTC certificates or City of Petaluma permits (PMC 8.38.070); additional space provided on back:	
Name	CAMTC/Permit Number
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

I have submitted true and correct information, and am responsible for the conduct of all employees or independent contractors working on the premises of the business. I understand that failure to comply with City of Petaluma Municipal Code Chapter 8.38, California Business and Professions Code 4600 and following, or any local, state, or federal law, may result in the revocation of the City permit. I hereby authorize the City of Petaluma, its agents and employees, to seek information and conduct an investigation into the truth of the statements set forth in the application and into the background of the applicant.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OWNER/PARTNER/RESPONSIBLE MANAGING OFFICERS**

2. Legal Name \_\_\_\_\_ CAMTC Number \_\_\_\_\_

Residence Address \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

- A copy of a valid, current driver license or picture identification bearing a bona fide seal issued by a state, federal government agency or foreign government is attached.
- A copy of the valid, unexpired and unrevoked CAMTC certificate is attached. If not CAMTC certified, a completed Background Check form is attached (PMC 8.38.070).

3. Legal Name \_\_\_\_\_ CAMTC Number \_\_\_\_\_

Residence Address \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

- A copy of a valid, current driver license or picture identification bearing a bona fide seal issued by a state, federal government agency or foreign government is attached.
- A copy of the valid, unexpired and unrevoked CAMTC certificate is attached. If not CAMTC certified, a completed Background Check form is attached (PMC 8.38.070).

**MESSAGE PRACTITIONERS**

Name	CAMTC/Permit Number
6. _____	
7. _____	
8. _____	
9. _____	
10. _____	
11. _____	
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