



# MASSAGE THERAPY ESTABLISHMENT APPLICATION

The annual application fees for a Massage Therapy Establishment are as follows:  
\$200 License Fee

The primary contact for applications submitted online will be contacted within 24 business hours to make a credit card payment over the phone for \$200. All fees are non-refundable.

\$22 Finger Print Fee (subject to change by DPS) to be paid at the time of the fingerprinting, with a cashier's check or money order payable to the Department of Public Safety. The Gilbert Police Department will call to schedule an appointment with the business owner to take fingerprints once they begin processing the application. Fingerprints to complete the background check are a requirement and must be administered by the Gilbert Police Department. This is required for initial applications only, not renewals.

The Town of Gilbert has a maximum of 65 days to process Massage Therapy Establishment business license applications.

The following documents must be attached to the application prior to being submitted. Incomplete applications or those received without the required supplemental information will not be processed.

NEW	RENEWAL	
X	X	Copy of a valid driver's license or other government photo ID for applicant
X	X	Copy of AZ massage license for all therapists
X	*	Two copies of the floor plan for the establishment

\*Required if any changes have been made.

## Special Requirements

The following provides information on the required inspection prior to the license being issued. **An inspection will be completed by the Code Compliance Department for all applications and renewals.**

The link to the Municipal Code for further research is <https://library.municode.com/>.

- **Sec. 14-354. - Massage therapy establishment license; special requirements.**

(a) No massage therapy establishment license shall be issued or renewed unless inspection by the fire department indicates the site of the proposed establishment complies with all the applicable provisions of the fire code.

(b) No massage therapy establishment license shall be issued or renewed unless inspection by the building and code compliance department indicates that the site of the proposed establishment complies with each and all of the following minimum requirements:

- (1) Minimum lighting shall be provided in accordance with the town building code and, in addition, at least one artificial light of not less than 40 watts shall be provided in each room or enclosure where massage or touching techniques are performed on patrons and shall be in use whenever such services are being performed.
  - (2) Minimum ventilation shall be provided in accordance with the town building code.
  - (3) Hot and cold running water shall be available in the establishment.
  - (4) Closed cabinets shall be provided for the storage of clean linens.
  - (5) A minimum of one dressing room for each patron to be served, and a minimum of one toilet and one washbasin shall be provided by each massage therapy establishment; provided, however, that if more than one patron will be served simultaneously at the establishment, a separate massage room is required for each patron served simultaneously, and separate dressing and toilet facilities shall be provided for male and female patrons.
  - (6) A minimum of one separate washbasin shall be provided in each massage therapy establishment, which basin shall provide soap or detergent and hot and cold running water at all times and shall be located within or as close as practical to the area devoted to the performing of massage or touching techniques. In addition, there will be provided at each washbasin, sanitary towels placed in permanently installed dispensers.
  - (7) Compliance with all applicable provisions of the town building code is required.
- (c) No massage therapy establishment license shall be issued or renewed if the applicant has been convicted within the last five years of any felony, or has been convicted within the last two years of any misdemeanor involving moral turpitude.
- (d) No massage therapy establishment license shall be issued to an applicant who is less than 18 years of age.
- (e) A massage therapy establishment licensee shall maintain at the massage therapy establishment a current log of all employees and independent contractors at the massage establishment, including:
- (1) The full legal name, date of birth, home address and telephone number, employment position, date first began employment and when employment was terminated, if applicable; and
  - (2) Each massage therapist's license number and date of expiration of license.
  - (3) The log shall at all times reflect the names for the previous one year. Wherever the log is located, the log shall be subject to inspection upon request, during normal business hours. A massage therapy establishment licensee shall maintain at the massage therapy establishment a log of all massage therapy administered at the establishment. The log shall contain the following information: date, time and type of each massage therapy administered, name and address of the client, and name of the massage therapist administering the massage therapy.
- (f) An applicant for a massage establishment license, a controlling person or a designated agent for a licensee, a manager, or a licensee shall permit representatives of the police department, town departments, and any other federal, state, county agency in the performance of any function connected with the enforcement of any code, statute or regulation relating to human health, safety or welfare or structural safety, normally and regularly conducted by such agency, to inspect the premises of a massage establishment for the purpose of ensuring compliance with the law, at any time it is lawfully occupied or open for business. It is a criminal offense as provided in this chapter as well as grounds for suspension or revocation for a licensee, employee, or agent to refuse to permit an inspection of the premises or records as provided herein.



# MESSAGE THERAPY ESTABLISHMENT APPLICATION

**PLEASE CHECK ONE OF THE FOLLOWING:**

THIS IS A NEW LICENSE

THIS IS A RENEWAL OF EXISTING LICENSE

OWNER INFORMATION - THIS IS THE LEGAL BUSINESS ENTITY (OR INDIVIDUAL OWNER) THAT OWNS THE BUSINESS, I.E. LLC

LEGAL OWNER NAME \_\_\_\_\_

LEGAL OWNER MAILING ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_

CIRCLE TYPE OF OWNERSHIP

Individual/Sole Proprietor\*    Corporation    LLC    Partnership    Public Non-Profit    Family Owned

\*Individual, sole proprietorship or husband and wife businesses must complete a Licensing Eligibility Form and provide a picture ID with this application.

PRIMARY CONTACT INFORMATION - this is the individual who will receive the business license and the renewal notification.

Primary Contact Name \_\_\_\_\_

Primary Contact Phone \_\_\_\_\_

Primary Contact E-mail \_\_\_\_\_

BUSINESS INFORMATION

Business Name - DBA, Name on Signage, Name known to the Public:

\_\_\_\_\_

AZ Sales Tax # \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_

Date to begin in Gilbert \_\_\_\_\_

Description of Exact Nature of Business

\_\_\_\_\_

If leasing commercial space, please provide Landlord Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Lease Expiration Date \_\_\_\_\_

Please complete the following information:

Total Sq Ft \_\_\_\_\_ # of F/T Employees \_\_\_\_\_ # of P/T Employees \_\_\_\_\_

Gross Annual Payroll \$ \_\_\_\_\_ # of shifts per day \_\_\_\_\_ # of operating days/week \_\_\_\_\_

**REQUIRED DOCUMENTS** – must be submitted with the application

NEW	RENEWAL	
X	X	Copy of a valid driver's license or other government photo ID for applicant
X	X	Copy of AZ massage license for all therapists
X	*	Two copies of the floor plan for the establishment

\*Required if any changes have been made.

\*Please initial whether changes have been made to the floor plan: YES  NO

I HEREBY CERTIFY THAT ALL ANSWERS AND INFORMATION ON THIS APPLICATION ARE TRUE AND CORRECT, INCLUDING THE DOCUMENTATION PROVIDED. ANY FALSE, MISLEADING OR INCOMPLETE INFORMATION CONSTITUTES GROUNDS FOR DENIAL OF THIS LICENSE.

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

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

The Town wishes to notify all applicants of certain rights the applicant has related to the issuance of a license.

Arizona Revised Statutes, Chapter 7, Article 4

9-834. Prohibited acts by municipalities and employees; enforcement; notice

A. A municipality shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or code. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition.

B. Unless specifically authorized, a municipality shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable.

C. This section does not prohibit municipal flexibility to issue licenses or adopt ordinances or codes.

D. A municipality shall not request or initiate discussions with a person about waiving that person's rights.

E. This section may be enforced in a private civil action and relief may be awarded against a municipality. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against a municipality for a violation of this section.

F. A municipal employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the municipality's adopted personnel policy.

G. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

## Wastewater Questionnaire - NOT REQUIRED FOR RENEWALS

Describe the activities that take place on the premises:

---

---

---

Does the facility generate any wastewater other than domestic sewage (domestic sewage is wastewater from toilets, sinks, showers, etc.)?  Yes  No

If yes, please explain:

---

---

Is any portion of the wastewater generated at the facility discharged to a septic system?  Yes  No

Does your facility contain any photographic or x-ray development processes on site?  Yes  No

Does your facility have a Grease Trap or Grease Interceptor on site?  Yes  No

Does the facility use or store petroleum oil, non-biodegradable cutting oil, mineral spirits or other products of petroleum or mineral oil on the premises?  Yes  No

If yes, please list materials, units, quantity and use: (Attach additional sheets if more room is needed)

<i>Material:</i>	<i>Units:</i> <i>(gallons, pounds, etc.)</i>	<i>Quantity:</i> <i>(per day, week, year)</i>	<i>Use</i>

Does the facility use or store any hazardous materials on the premises?  Yes  No (e.g. pesticides, organic chemicals, paints, wastes, radioactive substances, solvents, liquid wastes, bases, acids, or any other hazardous materials)

(If yes, please complete list materials, units, quantity and use: (Attach additional sheets if more room is needed)

<i>Material:</i>	<i>Units:</i> <i>(gallons, pounds, etc.)</i>	<i>Quantity:</i> <i>(per day, week, year)</i>	<i>Use</i>

The information provided above is true and correct to the best of my knowledge.

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

Printed Name \_\_\_\_\_

Title \_\_\_\_\_