



List all convictions for any crime involving conduct which requires registration under any state law similar to and including California Penal Code Section 290, or of conduct which is a violation of the provisions of any state law similar to and including California Penal Code Sections 314, 315, 316, 318, 647, or any crime involving dishonesty, fraud, deceit, or moral turpitude.

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Describe below all services to be provided.

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List below the full name, address and telephone number of each massage establishment where you will be employed. Include extra sheets if necessary.

Name of Establishment	Owner/Operator	Address	City/State/Zip
Name of Establishment	Owner/Operator	Address	City/State/Zip
Name of Establishment	Owner/Operator	Address	City/State/Zip

With my signature below, I hereby authorize the City, its agents and employees to seek information and conduct an investigation into the truth of the statements set forth in the application and the qualifications of the applicant for the permit. Any false information or statements is ground for denial of the application.

Signature		Print Name		Date
	+	+	=	
Application Fee	Start-Up Fee	Business Tax	Total	
Receipt No.	Taken By	Date		

