

8987

\$175.00
\$15.00 per applicant record check

Expires June 30, 20__

APPLICATION FOR CITY OF RACINE MASSAGE ESTABLISHMENT PERMIT

Are you applying as an: Individual Partnership Corporation Other (Specify): _____

FEIN: 391 675 832

Individual/Partnership Business Name _____

Name	Address	DOB
Individual Applicant _____		
Co-Applicant _____		

Corporation / LLC Business Name Racine Fani INC

Name	Address	DOB
President/Member <u>JANET FANI</u>	<u>401-71st Kenosh</u>	<u>10</u>
Vice President/Member <u>Suzanne Fani</u>	<u>401-71st Ken</u>	
Secretary/Member <u>Jennifer Partilia</u>	<u>1403-40 Av Ken</u>	
Treasurer/Member <u>Frank P Fani</u>	<u>7517-Cooper Rd Ken</u>	
Director/Manager _____		

Trade Name: Partners n Design

Business Address: 506 Coold St.

Business Phone: 262 6378329 Home Phone: 262 577 5050

Description of premise to be licensed: Styling Studio Day Spa

Pending charges and/or convictions of crime or misdemeanor, excepting traffic: _____

Offense _____ Date of Conviction _____

Place of Conviction _____ Sentence _____

For any additional offense(s) or conviction(s), attach separate sheet.

APPLICANT'S BUSINESS, OCCUPATION OR EMPLOYEMENT FOR PAST 3 YEARS:

Nature of Business/ Occupation/Employment	Dates	Name of Business	Address
<u>Partners n Design</u>			<u>506 Coold St.</u>

IF APPLICANT'S LICENSE, PERMIT OR CERTIFICATION FOR OPERATION OF ANY MASSAGE THERAPIST, MASSAGE ESTABLISHMENT OR SIMILAR BUSINESS AT ANY LOCATION HAS BEEN SUSPENDED, REVOKED OR RENEWAL DENIED, STATE:

Business Name and Address: WA

Reason for such action: _____

Applicant's business activity or occupation following such action: _____

NAME AND ADDRESS OF EACH MASSAGE THERAPIST WHO IS OR WHO IS PROPOSED TO BE EMPLOYED AT THE MASSAGE ESTABLISHMENT. For any additional therapist, attach separate sheet.

Name	Address	DOB	State of WI	License No.
Wanda Brink	Farris 205- Indigo St.			12790146

ATTACH PROOF THAT APPLICANT IS 18 YEARS OF AGE OR OLDER

APPLICANT ACKNOWLEDGES THAT HE/SHE HAS READ AND IS FAMILIAR WITH CHAPTER 22, ARTICLE XXII OF THE RACINE MUNICIPAL CODE, INCLUDING SECTIONS 22-783 AND 22-788, PROVIDING FOR INSPECTION OF THE PREMISES BY CITY PERSONNEL; PERMISSION TO MAKE SUCH INSPECTION IS HEREBY GRANTED BY APPLICANT.

AUTHORIZED SIGNATURES (If sole owner, owner must sign. If partnership, all partners must sign.

If corporation, two officers must sign.)

[Signature]
Signature

Taret fani Pr-
Print Name and Title

Signature

Suzanne fan. VP.
Print Name and Title

Signature

Print Name and Title

Signature

Print Name and Title