

\$175.00

\$15.00 per applicant record check

Bu: 2333
20183950-12

Expires June 30, 20__

APPLICATION FOR CITY OF RACINE MASSAGE ESTABLISHMENT PERMIT

Are you applying as an: ☒ Individual ☐ Partnership ☐ Corporation ☐ Other (Specify):__

FEIN: _____

Individual/Partnership Business Name T's wellness Center

	Name	Address	DOB
Individual Applicant	Tiffany Young	4305 Olive street Racine	
Co-Applicant			

Corporation / LLC Business Name Bliss2massage LLC

	Name	Address	DOB
President/Member	Tiffany Young	4305 Olive st Racine WI	
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Director/Manager			

Trade Name: T's Wellness Center

Business Address: 3312 Washington Ave

Business Phone: 262-930-1976 Home Phone: _____

Description of premise to be licensed: Ground-floor, Wellness Facility with reception, treatment/therapy rooms, staff restroom an accessible entry

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

N/A

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/

Name of

Occupation/Employment

Dates

Business

Address

Massage therapist 01/29/2014 bliss2masage LLC 3801 Monarch Dr Racine WI suite 2D

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: N/A

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.

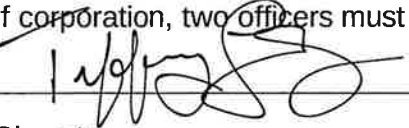
Name	Address	DOB	State of WI License No.
Tiffany Young	4305 Olive St.		12783-146

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

Tiffany Young Owner/Therapist

Print Name and Title

Signature

Print Name and Title

Signature

Print Name and Title

Signature

Print Name and Title

325- 2698
20183846- 10



Fee: \$250.00 (Full time)
\$150.00 (Temp)
\$50.00 (Pop-Up Temp)

CITY OF RACINE - DEPARTMENT OF CUSTOMER SERVICE
730 WASHINGTON AVE • ROOM 103 • RACINE WI 53403 • (262) 636-9171

APPLICATION FOR OCCUPANCY

NAME OF BUSINESS Bless2massage, LLC
Bless2massage has a wellness center
BUSINESS TRADE NAME T's wellness Center
BUSINESS ADDRESS 3312 Washington Ave Racine WI 53405
HOURS OF OPERATION 8AM - 10pm
NUMBER OF EMPLOYEES 1
TYPE OF BUSINESS THE LOCATION WAS AND WHAT IS YOU ARE APPLYING FOR
Wellness Center
ADDITIONAL COMMENTS massage therapies

APPLICANT'S NAME Tiffany Young
ADDRESS 3312 Washington Ave 4305 Olive St.
PHONE & EMAIL wellnesscenter23@gmail.com Racine
53405
PROPERTY OWNER'S NAME Tiffany Young
ADDRESS 3312 Washington Ave Racine WI 53405
PHONE & EMAIL 262 930-1976

SIGNATURE OF APPLICANT

SIGNATURE OF OWNER

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Credential/License Summary for 12773 - 146

As of September 11, 2025 11:27:26 AM

Name : Tiffany C Young**Credential/License Number :** 12773 - 146**Professions :** Massage Therapist or Bodywork Therapist**Location :** Racine, Wisconsin - 53405**Credential/License Type :** Regular**Status :** License is current (Active)**Eligible To Practice :** Eligible**Credential Expiration Date :** 2027-02-28**Granted Date :** 2014-01-29**Multi-State :** N**Orders :** 0**Specialities :****Other Names :**

Orders for 12773 - 146



No Orders Found

Relationships for 12773 - 146**Individual**

No Individual Relationships Found

Organization



No Organization Relationships Found

ATTENTION: The information provided through this public lookup constitutes official certification of licensure information and credential verification for professions regulated by the Wisconsin Department of Safety and Professional Services and its attached boards. If a renewal application including payment is received by the expiration date, the credential holder is eligible to practice while the credential renewal is processed. The credential holder must respond to any requests for information during the renewal process. See Wis. Stat § 227.51(2). Consistent with The Joint Commission and NCQA standards for primary source verification. Send questions or comments to dsps@wisconsin.gov (<mailto:dsps@wisconsin.gov>)

Contact Information

4822 Madison Yards Way Madison, WI 53705 [\(608\) 266-2112 \(tel: +6082662112\)](tel:+6082662112)

[\(877\) 617-1565 \(tel: +8776171565\)](tel:+8776171565)

[\(https://www.wisconsin.gov/\)](https://www.wisconsin.gov/)

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THE STATE OF WISCONSIN

MASSAGE THERAPY AND BODYWORK THERAPY AFFILIATED CREDENTIALING BOARD

Hereby certifies that

TIFANY C YOUNG

was granted a license to practice as a

MASSAGE THERAPIST OR BODYWORK THERAPIST

*in the State of Wisconsin in accordance with Wisconsin Law
on the 29th day of January in the year 2014.*

The authority granted herein must be renewed each biennium by the granting authority.

In witness thereof, the State of Wisconsin

*Massage Therapy and Bodywork Therapy Affiliated Credentialing Board
has caused this certificate to be issued under*

the seal of the Department of Safety and Professional Services

Dave Ross, Secretary



Scott Walker, Governor



This certificate was printed on the 5th day of March in the year 2015

