

8697

\$175.00
\$15.00 per applicant record check

Expires June 30, 2023

APPLICATION FOR CITY OF RACINE MASSAGE ESTABLISHMENT PERMIT

#2851

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

FEIN: 85-4091975

Individual/Partnership Business Name Relax spa massage

	Name	Address	DOB
Individual Applicant	ZHONG GUO CHEN	403 SIXTH ST Racine	WI 53403
Co-Applicant			

Corporation / LLC Business Name

	Name	Address	DOB
President/Member	ZHONG GUO CHEN	403 SIXTH ST Racine	WI 53403
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Director/Manager			

Trade Name: Relax spa massage

Business Address: 403 SIXTH ST Racine WI 53403

Business Phone: Home Phone: 608-531-8388

Description of premise to be licensed:

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:

<u>Nature of Business/</u>	<u>Name of</u>	<u>Dates</u>	<u>Business</u>	<u>Address</u>
Occupation/Employment				
Relax spa massage				

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: N/A

Applicant's business activity or occupation following such action: N/A

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.

State of WI

Name	Address	DOB	License No.
ZHONG GUO CHEN	403 Sixth St Racine WI		53403 # 15458 - 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.)

ZHONG GUO CHEN

ZHONG GUO CHEN

Signature

Print Name and Title

Signature

Print Name and Title

Signature

Print Name and Title

Signature

Print Name and Title