

cust # 8240 Bus # 3044

46 Bill # 182

20181652-0026

45

\$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: 93-1717635

#### Individual/Partnership Business Name

	Name	Address	DOB
Individual Applicant	_____	_____	_____
Co-Applicant	_____	_____	_____

#### Corporation / LLC Business Name

	Name	Address	DOB
President/Member	<u>YUNG ZHOU</u>	<u>165 E. GOLDEN LAKE</u>	_____
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Director/Manager	_____	_____	_____

Trade Name: MOON MASSAGE DBA HONAN SPA

Business Address: 906 State Street

Business Phone: 262-399-3417 Home Phone: 312-678-1610

Description of premise to be licensed: Downtown Store Front

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>Dates</u>	<u>Business</u>	<u>Address</u>
<u>massage therapy</u>	<u>10/22-12/23</u>	<u>Best Massage</u>	<u>6665 Odessa Rd madison</u>
<u>manager</u>	<u>4/20-9/22</u>	<u>HAPPY CAFE</u>	<u>2351 S. WENTWORTH CHICAGO</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: \_\_\_\_\_

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.
<u>Yune Zhou</u>	<u>165 E. Golden Ln</u>		
<u>Lihua Liu</u>	<u>165 E. Golden Ln</u>		

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.

Yune 13194-146 ✓  
Lihua 14936-146 ✓

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

If corporation, two officers must sign.)

<u>Yune Zhou</u>	<u>Yune Zhou</u> <u>President</u>
Signature	Print Name and Title
_____	_____
Signature	Print Name and Title
_____	_____
Signature	Print Name and Title
_____	_____
Signature	Print Name and Title
_____	_____