



MASSAGE & BODYWORK ESTABLISHMENT INFORMATION SHEET

- You may apply for a Massage or Bodywork Establishment License online at <https://aca-prod.accela.com/MESA/Default.aspx>.
 - Applications submitted in person in the Licensing office will only be accepted Monday through Thursday between the hours of 7:00 AM to 5:30 PM.
- The following fee is non-refundable and must be paid upon submission of the license application. Please make all checks and money orders payable to: City of Mesa.
 - Application Fee \$100.00
- The following fee is non-refundable and must be paid at the time of application approval.
 - License Fee \$100.00
- Along with all applicable fees, the following additional documentation must be submitted with your completed application:
 - Corporation, LLC, and partnerships: Articles of Incorporation, Article of Organization, Certificate of Limited Partnership, together with any amendments thereto.
 - A clear and legible 8 ½ x 11 sketch or diagram that shows a detailed layout of the business premise per Mesa City Code 5-12-5 (22).
 - Copy of business location lease or occupancy agreement
 - Property Certification Form
 - Employee Log
 - Copy of the Arizona Massage Therapy License for each therapist that will be operating at the business location
 - For all individuals with 10% or greater ownership interest:
 - Government issued photo identification card
 - Supplemental Questionnaire for each individual other than the applicant
 - Licensing Eligibility Form (sole proprietor and joint venture business entities only)
 - **Full set of fingerprints or receipt from Secureone located at:**

132 West Pepper Place, Mesa AZ 85201
Phone: (480) 500-7309
Office hours: Monday through Friday, 9:00 AM to 5:00 PM
- Prior to the issuance of your license, the application must be approved by the following Mesa departments:
 - Police Investigations & Alarm Unit
 - Fire
 - Development Services (Planning, Building Safety)
 - Tax Audit & Collections
 - Licensing
- If approved, all Massage and Bodywork Establishment licenses will be valid for a period of one (1) year from the date of issuance.
- To renew this license, a completed renewal application, fingerprints, Employee Log, photo identification card, and \$100.00 non-refundable annual fee must be submitted to the Licensing office at least forty-five (45) days prior to the expiration date of the license.
- **If you are engaging in any taxable activity within the Mesa city limits, you must register and apply online for a Transaction Privilege Tax (TPT) License at <https://azdor.gov/transaction-privilege-tax-tpt>. The TPT license is issued and administered by the Arizona Department of Revenue, which can be reached by calling (602) 255-3381.**



APPLICATION FOR MESSAGE & BODYWORK ESTABLISHMENT LICENSE

NON-REFUNDABLE \$100.00 FEE DUE AT TIME OF APPLICATION - CODE 0570

**** This application will not be processed unless it has been completed in its entirety and submitted with all required supplemental documents. ****

Check License Type Applying For:			<input type="checkbox"/> Message Establishment	<input type="checkbox"/> Bodywork Establishment
SECTION I. ESTABLISHMENT INFORMATION				
Establishment Name (DBA)				
Establishment Street Address			City, State, Zip	
Business Email Address			Business Phone Number	
Days of Operation		Hours of Operation		
Will any food or merchandise be sold at the establishment? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Types of Services Offered			State TPT License Number
	Describe Types of Items Sold			
SECTION II. MAILING ADDRESS				
Mailing Name (Designated Agent)				
Street Address or PO Box				
City, State, Zip				
SECTION III. LANDLORD INFORMATION (Attach copy of lease or rental/occupancy agreement & signed property certification form)				
Do you own the establishment location? <input type="checkbox"/> Yes <input type="checkbox"/> No	Landlord Name		Landlord Phone Number	
	Landlord Address		City, State, Zip	
SECTION IV. OWNERSHIP INFORMATION				
Type of Ownership: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other_____				
Organization Name (LLC, corporation, etc.)				
Organization Legal Address			City, State, Zip	
Business Email Address			Federal Employer Identification Number	
SECTION V. CONTROLLING PERSON(S) WITH 10% OR GREATER OWNERSHIP INTEREST OR EARNINGS OF THE BUSINESS				
Title/Position	Name			% Owned
SECTION VI. INITIAL APPLICANT'S INFORMATION				
Applicant's Name	Last	First	M	
Home Address				Home Phone Number
City, State, Zip				
Previous names by which you have been known and the years in which they were used				

CITY OF MESA - APPLICATION FOR MASSAGE & BODYWORK ESTABLISHMENT LICENSE

ESTABLISHMENT NAME FROM PAGE 1, SECTION I:				
Title/Position at Establishment		Personal Email Address		
Social Security Number	Date of Birth (month, day, year)	US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Place of Birth City, State, Country	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			
Race	Color of Eyes	Weight	Height	Color of Hair

SECTION VII. APPLICANT'S HOME ADDRESS HISTORY FOR PAST 10 YEARS BEGINNING WITH PRESENT ADDRESS

From	To	Street Address	City, State, Zip
	Present		

SECTION VIII. APPLICANT'S BUSINESS, OCCUPATION OR EMPLOYMENT HISTORY FOR PAST 10 YEARS

From	To	Business Name	Business Address

SECTION IX. BACKGROUND INFORMATION (Please read carefully. If not answered completely, it may be cause for this license request to be denied.)

In the past 10 years, have you had a felony arrest or been convicted of a felony, misdemeanor, including dismissals, expungement, or convictions that have been set aside, but excluding civil traffic offenses? Yes No

(If yes, list all convictions below. Attach a separate sheet if needed)

Date	Offense	Location of Offense	Penalty Assessed

Have you ever had a business license suspended, denied or revoked in this or any other city, county, state or federal agency? Yes No

Date	License Type	City/State/County	Reason for Action & Outcome

SECTION X. SIGNATURE AND CERTIFICATION

IMPORTANT

I hereby give consent to the City of Mesa to investigate my background, including any police records or records of any kind or description. I hereby waive any claim or cause of action regarding the use of my background information or police record that I may have against the City of Mesa or its or its agents and employees, and against any other individual or agency disclosing or releasing background information to the City of Mesa.

I certify that the statements made in this application are true, complete, and correct to the best of my knowledge. Any false, misleading, or incomplete information constitutes grounds for denial of this license. I understand that issuance of a business license shall in no way be construed as permission to operate a business in violation of any other law or regulation to which such activity may be subject. Also, this license does not preclude the authority of other city agencies. I should call the Planning Division at 480-644-2385 if I have questions concerning land use, zoning, before engaging in business.

I also certify that I am familiar with the Code provisions governing the Massage and Bodywork Establishment License that I am applying for. I hereby attest that I have verified that no person not qualified to own, control, or manage a Massage or Bodywork Establishment is involved in the ownership, control, or management of this applicant.

Print Name	Signature	Date

Revenue Collections Operations
Licensing Office
 55 North Center Street
 Mesa Arizona
 (480) 644-2316 Tel



Mailing Address
 PO Box 1466
 Mesa Arizona 85211-1466
 (480) 644-3999 Fax

**MESSAGE & BODYWORK ESTABLISHMENT LICENSE
 SUPPLEMENTAL QUESTIONNAIRE
 ADDITIONAL OWNERS AND OFFICERS OTHER THAN APPLICANT**

SECTION I. CONTROLLING PERSON(S) WITH 10% OR GREATER OWNERSHIP INTEREST OR EARNINGS OF THE BUSINESS

Name		Last		First		M.	
Home Address							
City, State, Zip						Home Phone Number	
Previous names by which you have been known and the years in which they were used.							
Title/Position at Establishment						Personal Email Address	
Social Security Number				Date of Birth (month, day, year)		US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Place of Birth City, State, Country						Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Race	Color of Eyes	Weight	Height	Color of Hair			

SECTION II. RESIDENTIAL ADDRESSES FOR PAST 10 YEARS BEGINNING WITH PRESENT ADDRESS

From	To	Street Address	City, State
	Present		

SECTION III. APPLICANT'S BUSINESS, OCCUPATION OR EMPLOYMENT HISTORY FOR PAST 10 YEARS

From	To	Business Name	City, State, Zip

CITY OF MESA - MASSAGE & BODYWORK ESTABLISHMENT LICENSE SUPPLEMENTAL QUESTIONNAIRE

CONTROLLING PERSON NAME FROM SUPPLEMENTAL QUESTIONNAIRE PAGE 1,SECTION I:

SECTION IV. BACKGROUND INFORMATION
(Please read carefully. If not answered completely, it may be cause for this license request to be denied.)

In the past 10 years, have you had a felony arrest or been convicted of a felony, misdemeanor, including dismissals, expungement, or convictions that have been set aside, but excluding civil traffic offenses? Yes No

(If yes, list al convictions below. Attach separate sheet if needed.)

Date	Offense	Location of Offense	Outcome

Have you ever had a business license suspended, denied or revoked in this or any other city, state county, or federal agency? Yes No

Date	License Ttype	City/State/County	Reason for Action & Outcome

SECTION V. SIGNATURE AND CERTIFICATION

IMPORTANT

I hereby give consent to the City of Mesa to investigate my background, including any police records or records of any kind or description. I hereby waive any claim or cause of action regarding the use of my background information or police record that I may have against the City of Mesa or its agents and employees, and against any other individual or agency disclosing or releasing background information to the City of Mesa.

I certify that the statements made in this application are true, complete, and correct to the best of my knowledge. Any false, misleading, or incomplete information constitutes grounds for denial of this license. I understand that issuance of a business license shall in no way be construed as permission to operate a business in violation of any other law or regulation to which such activity may be subject. Also, this license does not preclude the authority of other city agencies. I should call the Planning Division at 480-644-2385 if I have questions concerning land use, zoning, before engaging in business.

I also certify that I am familiar with the Code provisions governing the Massage and Bodywork Establishment License that I am applying for. I hereby attest that I have verified that no person not qualified to own, control, or manage a Massage or Bodywork Establishment is involved in the ownership, control, or management of this applicant.

Print Name	Signature	Date
------------	-----------	------



Business Services – Licensing Office MS 1190
55 N. Center St.
P.O. Box 1466
Mesa, AZ 85211-1466
480-644-2316

Licensing.Info@mesaaz.gov
<http://mesaaz.gov/business/licensing>

Massage & Bodywork Establishment Sketch Requirements Information

A clearly legible sketch or diagram showing the configuration of the overall business premises of the massage establishment or bodywork establishment that includes, at a minimum, all the following:

- The location of all interior doors, walls, curtains, and room dividers.
- A description of the use of each interior space or room, including a designation, by type of use, of each room or space available for bodywork or massage therapy.
- A designation of each room or space that is being, or is intended to be, leased, subleased, or licensed for use by any person other than the applicant and a description of its intended and actual use.

The sketch or diagram need not be professionally prepared but shall be drawn on one (1) page measuring 8 ½ inches x 11 inches with marked dimensions of the interior of the premises to an accuracy of plus or minus six (6) inches.

A “wall” shall include any interior barrier, including transparent glass, which extends more than fifty-four (54) inches from the level of the finished floor.

MASSAGE & BODYWORK ESTABLISHMENT DIAGRAM

Business Name: _____

License No. _____

Business Address: _____

Days & Hrs Open _____

(Include all interior doors, walls, curtains, and room dividers. Designate the type of use for each room and its dimensions. Any room or space planned to be leased, subleased, or licensed by any person other than applicant)

List of Services: _____



Business Services – Licensing/MS 1190
 PO Box 1466
 Mesa AZ 85211-1466
 Ph: 480-644-2316 Fax: (480) 644-3999
Licensing.Info@mesaaz.gov

Massage and Bodywork Establishment Property Certification

Please complete the following form relating to the entity that is applying for a massage or bodywork establishment license within the City of Mesa. **This form must be signed by the property owner, landlord, and all controlling persons with 10% or more interest of the below named establishment.**

Per Mesa City Code 5-12-5, a massage or bodywork establishment application will not be considered complete or eligible for a license until this fully completed form is submitted to the Licensing office.

Business Name (DBA): _____

Business Location Address: _____

Type of License Applied For: _____

I acknowledge that it is a class 3 misdemeanor under ARS Revised Statute § 13-2908 to, by conduct either unlawful in itself or unreasonable under the circumstances, recklessly create or maintain a condition which endangers the safety or health of others, or to knowingly conduct or maintain any premises, place, or resort where persons gather for purposes of engaging in unlawful conduct.

Furthermore, I understand that it shall be a considered a civil violation of Mesa City Code 5-12-6, if a manager, landlord, or property owner that has a massage establishment or bodywork establishment occupant, knowingly permits, or negligently fails to take reasonable actions to prevent criminal activity from occurring in or on the premises of the massage establishment or bodywork establishment.

Property Owner Name (Print)	Property Owner Signature	Contact Phone	Date
-----------------------------	--------------------------	---------------	------

Landlord Name (Print)	Landlord Signature	Contact Phone	Date
-----------------------	--------------------	---------------	------

Controlling Person 1 Name (Print)	Controlling Person 1 Signature	Contact Phone	Date
-----------------------------------	--------------------------------	---------------	------

Controlling Person 2 Name (Print)	Controlling Person 2 Signature	Contact Phone	Date
-----------------------------------	--------------------------------	---------------	------

Controlling Person 3 Name (Print)	Controlling Person 3 Signature	Contact Phone	Date
-----------------------------------	--------------------------------	---------------	------



Massage and Bodywork Establishment Employee & Contractor Log

Per Mesa City Code, Title 5, Chapter 12, a list of all employees and independent contractors who will provide massage therapy or bodywork within Mesa must be submitted to the City. Any changes to staffing during the license term must be reported within ten (10) calendar days of the occurrence.

For new or renewal applications: Complete the following form by listing the below requested information for all establishment employees and contractors. This form must be submitted to the Licensing office along with your new or renewal Massage or Bodywork Establishment application.

For existing establishment licensees: If you are just reporting a change, complete this form by providing all below requested information for only the individuals being added or removed.

****Please note: A copy of the Arizona Massage Therapy License for each therapist that will be performing massage at the establishment must be included with this completed form. This includes new and renewal applications and existing establishment licensees reporting a change.**

Business Name (DBA): _____

Business Location Address: _____

License or Application Number: _____

Employee or Contractor Name	Employment Position	Hire Date	Does this person perform massage?	Is this an existing employee or a change in status?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing

 Licensee Name (Print) Licensee Signature Contact Phone Date

NOTICE TO SOLE PROPRIETOR, INDIVIDUAL AND/OR HUSBAND & WIFE BUSINESSES

All persons applying for municipal licensing as Individuals, Sole Proprietors, or Husband & Wife businesses, must provide evidence of their legal right to be in the United States in compliance with A.R.S. 41-1080, also known as the "Legal Arizona Workers Act."

If applying by mail, applicants must submit the eligibility form with the application. Please indicate, by checking the appropriate box, which of the 12 forms of documentation will be provided to verify legal status under federal law. Return the completed eligibility form along with the application, applicable fees and a copy of the documentation showing your legal status.

If applying in person at the Licensing Office, applicants must show one of the 12 types of documentation listed on the eligibility form with the application and applicable fees. The eligibility form will be completed upon presentation of the documentation.

Per State law, the City of Mesa Licensing Office cannot issue a license unless it first receives a copy of one of the specified forms of identification and a signed eligibility form.

*****NOTE: A Government issued photo ID must be presented with any document that does not contain a photograph of the individual.**

LICENSING ELIGIBILITY

Before issuing a license to an individual, the individual must present one of the following documents to the municipality indicating that the individual's presence in the United States is authorized under federal law.

Do not complete this form if the license applicant is a corporation, limited liability company or general partnership.

Check the box next to the document indicating lawful presence.

*****NOTE: A Government issued photo ID must be presented with any document that does not contain a photograph of the individual.**

	An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
	A driver license issued by a state that verifies lawful presence in the United States. (See Overview of States' Driver's License Requirements) NOT accepted: HI, NM, UT, WA Note: a WA "Enhanced" Driver License is acceptable
	A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
	A United States certificate of birth abroad.
	A United States passport or passport card.
	A foreign passport with a United States visa.
	An I-94 form with a photograph.
	A United States citizenship and immigration services employment authorization document or refugee travel document.
	A United States certificate of naturalization.
	A United States certificate of citizenship.
	A tribal certificate of Indian blood.
	A tribal or bureau of Indian affairs affidavit of birth.
	A consular identification card issued by a foreign government that uses biometric identity verification.
	<u>Description</u> of other ID issued by: U.S. Government, other State government, an agency of this State or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuance.

This provision does not apply to an individual, if EITHER:

1. BOTH of the following apply:
 - a. The individual is a citizen of a foreign country or, if at the time of application, the individual resides in a foreign country.
 - b. The benefits that are related to the license do not require the individual to be present in the United States in order to receive those benefits.

OR

2. ALL of the following apply:
 - a. The individual is a resident of another state.
 - b. The individual holds an equivalent license in that other state and the equivalent license is of the same type being sought in this state.
 - c. The individual seeks the Arizona license to comply with this state's licensing laws and not to establish residency in this state.

Signature of applicant

Date

Signature of municipal employee

Date

55 N. Center Street
PO Box 1466
Mesa Arizona 85211-1466
(480) 644-2316 Tel
(480) 644-3999 Fax



Business Services – Licensing Office MS 1190
55 N. Center St.
P.O. Box 1466
Mesa, AZ 85211-1466
480-644-2316
Licensing.Info@mesaaz.gov
http://mesaaz.gov/business/licensing

MESSAGE & BODYWORK ESTABLISHMENT LOCK DEVICE SYSTEM

Date: _____

Establishment Business (DBA) Name: _____

Establishment Address: _____

Requestor Name: _____

Requestor Phone Number: _____

Pursuant to Mesa City Code 5-12-18 (A)(3): It is not a violation of MCC 5-12-18(A)(3) if the licensee “utilizes a locking system approved in writing by the Mesa Police Department and which provides the Police Department with the ability to unlock the doors during regular business hours of the establishment for the purpose of conducting a lawful inspection authorized by Mesa City Code, Title 5 Chapter 12.

This signed form serves as the request of the massage or bodywork establishment licensee to the Mesa Police Department to approve a locking system for the above-named establishment location as per the above cited section of the Mesa City Code.

License Name (Printed)

Date

Licensee Signature (Printed)

Date

Mesa Police Department Representative

Date

Licensing and Application Requirements House Bill 2212

The City wishes to notify all applicants of certain rights the applicant has related to the issuance of a license. The City shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or code. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition. Unless specifically authorized, the City shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable, however this does not prohibit municipal flexibility to issue licenses or adopt ordinances or codes. The City shall not request or initiate discussions with a person about waiving that person's rights provided to them under Arizona Revised Statutes Title 9, Chapter 7, Article 4. The requirements of A.R.S. § 9-834 may be enforced in a private civil action and relief may be awarded against the City and the court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in such an action against a municipality. A City employee may not intentionally or knowingly violate A.R.S. § 9-834 and a violation of the statute is cause for disciplinary action or dismissal pursuant to City policy. The requirements of A.R.S. § 9-834 do not abrogate the immunity provided to the City or its employees by A.R.S. § 12-820.01 or § 12-820.02.

A.R.S. § 9-834. PROHIBITED ACTS BY MUNICIPALITIES AND EMPLOYEES; ENFORCEMENT; NOTICE

- A. A MUNICIPALITY SHALL NOT BASE A LICENSING DECISION IN WHOLE OR IN PART ON A LICENSING REQUIREMENT OR CONDITION THAT IS NOT SPECIFICALLY AUTHORIZED BY STATUTE, RULE, ORDINANCE OR CODE. A GENERAL GRANT OF AUTHORITY DOES NOT CONSTITUTE A BASIS FOR IMPOSING A LICENSING REQUIREMENT OR CONDITION UNLESS THE AUTHORITY SPECIFICALLY AUTHORIZES THE REQUIREMENT OR CONDITION.
- B. UNLESS SPECIFICALLY AUTHORIZED, A MUNICIPALITY SHALL AVOID DUPLICATION OF OTHER LAWS THAT DO NOT ENHANCE REGULATORY CLARITY AND SHALL AVOID DUAL PERMITTING TO THE MAXIMUM EXTENT PRACTICABLE.
- C. THIS SECTION DOES NOT PROHIBIT MUNICIPAL FLEXIBILITY TO ISSUE LICENSES OR ADOPT ORDINANCES OR CODES.
- D. A MUNICIPALITY SHALL NOT REQUEST OR INITIATE DISCUSSIONS WITH A PERSON ABOUT WAIVING THAT PERSON'S RIGHTS.
- E. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST A MUNICIPALITY. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST A MUNICIPALITY FOR A VIOLATION OF THIS SECTION.
- F. A MUNICIPAL EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE MUNICIPALITY'S ADOPTED PERSONNEL POLICY.
- G. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.
- H. A MUNICIPALITY SHALL PROMINENTLY PRINT THE PROVISIONS OF SUBSECTIONS A, B, C, D, E, F AND G OF THIS SECTION ON ALL LICENSE APPLICATIONS.
- I. THE LICENSING APPLICATION MAY BE IN EITHER PRINT OR ELECTRONIC FORMAT.



Senate Bill 1382 Requirements

Arizona Revised Statute § 9-495 requires in any written communication between a city or town and a person to provide the name, telephone number, and email address of the employee who is authorized and able to provide information about the communication if the communication does any of the following:

1. Demands payment of a tax, fee, penalty, fine or assessment;
2. Denies an application for a permit or license that is issued by the city or town; or
3. Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the city or town.

An employee who is authorized and able to provide information about any communication that is described above shall reply within five (5) business days after the city or town receives that communication.