



## Development Services Department

# Massage Business Supplemental Application

### INSTRUCTIONS TO APPLICANT

The applicant must complete the attached form as prescribed, and all of the following information must be attached before it can be accepted for filing by the City Clerk.

1. Application fee – Ordinance No. 182
  - a. The fee for massage technicians, massagists, who do not maintain a permanent place of business in the City, is \$150 per year, plus a \$50 investigation charge.
  - b. The fee for each massage business maintaining a permanent place of business is \$200 per year. This fee shall include the first member of the firm, corporation, association, syndicate and partnership practicing the profession, plus \$50 per year for each additional practicing member of the firm, corporation, association, syndicate or partnership.
  - c. PENALTY – FAILURE TO PAY. For failure to pay an annual license fee when due, the City Clerk shall add a penalty of ten percent (10%) of the license fee on the first day of each month after the due date thereof; and a failure to pay the license fee when due, the officer shall add a penalty of fifty percent (50%) of the annual license fee on the day following the due date thereof.
  - d. CHANGE OF PLACE OF BUSINESS – FEE. Where a person is authorized by the issuance of a valid license to transact and carry on a business at a particular place, such person may, upon application therefore show compliance with all the requirements of this Ordinance and pay a fee of fifty (\$50) dollars have the license amended to authorize the transaction and carry on such business under the license at some other location to which the business is or is to be moved.
  - e. BRANCH ESTABLISHMENTS. A separate business license must be obtained for each branch establishment or location of the business transacted.

### PROCEDURE BY THE CITY CLERK

The City Clerk, Police Department, and City Attorney will review all requests and determines if the proposed massage business meets all requirements of Ordinance No. 182 of the City of Adelanto.

**APPLICATION FOR HOME OCCUPATION PERMIT**

ADDITIONAL INFORMATION

Please provide the following information:

1. a. Full name and any aliases used or currently used.


- b. Current address and telephone number.


2. Fingerprints as may be required by the Adelanto Police Department and current fees as may be required by the Department of Justice, State of California and the San Bernardino County Sheriff's Office or Adelanto Police Department for processing such fingerprints.

3. a. The two (2) previous business addresses of the applicant immediately prior to the current address.


- b. The two (2) previous residence addresses of the applicant immediately prior to the current address.


4. Written proof that the applicant is over the age of eighteen (18) years.

5. Three (3) current photographs at least two inches by two inches in size.

6. The business, occupation, or employment of the applicant for three (3) years immediately preceding the date of the application.


7. Any massage or similar business license history of the applicant, including whether such person, in previous operations, in this or another area, has had his or her license revoked or suspended, the reason therefore, and any business activity or occupation subsequent to the action of suspension or revocation.

8. All convictions and the grounds therefore.

**APPLICATION FOR HOME OCCUPATION PERMIT**


9. Furnish a diploma or certificate of graduation from a recognized school or other institution of learning wherein the method, profession, or work of massage technician or massagist is taught. The City Clerk shall confirm that an applicant has actually attended classes at, and matriculated from, a recognized school.
  
10. Furnish a certificate from a medical doctor stating that the applicant has been examined and found to be free of any contagious or communicable disease.
  
11. All applications must be made in triplicate. The City Clerk shall keep one complete application of which, one complete application shall be transmitted to the Adelanto Police Department and one complete application shall be transmitted to the City Attorney's office.
  
12. Upon payment of all fees to the City Clerk, submission and confirmation of all information required by the application, and upon property inspection, a permit may be granted subject to a waiting period not to exceed one-hundred twenty (120) days, starting from the date such license is first applied for. During such time as a condition precedent to such applicant's right to receiving a business license hereunder, applicant shall present evidence satisfactory to the Adelanto Police Department's office necessary to conduct an investigation to support or reject a permit to carry on the business of a massage technician or massagist. If all requirements of all departments concerned, as well as those described herein, are met and unless it appears that any such applicant has deliberately falsified the application, or the record of such applicant reveals a conviction of a felony or a crime of moral turpitude, a permit may be issued. Any person denied a permit pursuant to these provisions may appeal to the City Council in writing, stating reasons why the permit should be granted. The City Council may grant or deny the permit. All permits issued hereunder are nontransferable.
  
13. Every person to whom a permit shall have been granted shall display said permit in a conspicuous place.

**APPLICATION FOR HOME OCCUPATION PERMIT**

CASE NO. \_\_\_\_\_ DATE FILED \_\_\_\_\_

Total Fees Paid \_\_\_\_\_ Receipt No. \_\_\_\_\_

Name of Applicant		Phone	
Address			
City		State	Zip Code
Name of Representative		Phone	
Address			
City		State	Zip Code

[Applicant must be the owner of the land, the lessee having a leasehold interest of not less than three (3) years, or the agent of the foregoing, duly authorized in writing.]

I/We the undersigned owner , lessee  or agent  of the property described below, hereby request that the Planning Director action identified above occur on property located at \_\_\_\_\_

between \_\_\_\_\_ (St., Ave., Rd.)  
and \_\_\_\_\_ (St., Ave., Rd.) in a \_\_\_\_\_ Zone.

The EXACT CURRENT legal description of said property is: (the legal description may be given as tract lots, including Section, Township, and Range, or it may be described by metes and bounds with a point of beginning that can be identified on the City Engineer's maps).

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Assessors Parcel No. \_\_\_\_\_

<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Signature: _____
Date: _____



**APPLICATION FOR HOME OCCUPATION PERMIT**

3. Why do you feel your business is more appropriate as a home occupation, rather than required to locate at a commercial address?

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4. How long do you propose to operate your business as a home occupation?

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5. Explain how your business, if similar to an established commercial business, should be able to operation under a Home Occupation Permit.

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## APPLICATION FOR HOME OCCUPATION PERMIT

6. In reviewing and acting upon an application for a Home Occupation Permit the Director must determine the applicant's ability to meet the following requirements. Please initial the following criteria indicating your understanding of them.

\_\_\_\_\_ All businesses and Home Occupations shall obtain and have renewed annually a Business License through the City of Adelanto.

\_\_\_\_\_ Home Occupation uses shall be incidental to the primary use of the structure as a residential use and shall not detract from the residential character of the neighborhood. No more than five hundred (500) square feet of the floor area of the dwelling unit may be used in connection with a Home Occupation or for storage purposes in connection with a Home Occupation.

\_\_\_\_\_ Only individuals permanently residing on the premises shall be employed in the Home Occupation.

\_\_\_\_\_ There shall be no exterior indication of the home occupation or variation from the residential character of the principal building.

\_\_\_\_\_ There shall be no exterior operations, storage, or display of materials to be used in conjunction with a Home Occupation.

\_\_\_\_\_ There shall be no signs, banners, or flags displayed which would be visible from outside the dwelling unit.

\_\_\_\_\_ There shall be no process, procedure, substance, or chemical used which is hazardous to public health, safety, morals, or welfare.

\_\_\_\_\_ Visitors, customers, or deliveries associated with the permitted home occupation use shall not shall not exceed a five (5) trips per day.

\_\_\_\_\_ No home occupation activity shall produce noxious matter, vibrations, glare, dust, electrical interference, or perceptible noise beyond the lot line.

\_\_\_\_\_ No advertisement shall be placed in any media containing the address of the property.

**APPLICATION FOR HOME OCCUPATION PERMIT**

7. The following statement must be signed in front of a Notary and original Notary acknowledgement attached to this document, or signed in front of Planning Staff.

I/We \_\_\_\_\_

(Please Print)

being first duly sworn, each for himself or herself, deposes and says that I/we am/are the owner(s) /lessee /agent  of the property involved in this application and that the foregoing statements herein contained and the information herein submitted, are in all respects true and correct to the best of my knowledge and belief.

Signature of Applicant: \_\_\_\_\_

(if different from owner)

Signature of Owner:					
Mailing Address:					
City		State		Zip Code	
Phone (H)			Phone (W)		

**APPLICATION FOR HOME OCCUPATION PERMIT**

LETTER OF AUTHORIZATION  
IF APPLICANT OTHER THAN PROPERTY OWNER

I, \_\_\_\_\_, as owner(s) of property identified as Assessor's Parcel  
Property Owner(s)

No(s). \_\_\_\_\_ and/or Tract/Parcel Map \_\_\_\_\_, Parcel/Lot

No. \_\_\_\_\_ do hereby authorize \_\_\_\_\_ to represent me  
Authorized Agent

as agent in seeking approval of the following project(s): \_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_  
Property Owner(s)

Date: \_\_\_\_\_

Signed \_\_\_\_\_  
Authorized Agent

Date: \_\_\_\_\_

NO APPLICATION FROM AN INDIVIDUAL OTHER THAN THE PROPERTY OWNER  
WILL BE ACCEPTED UNLESS THIS DOCUMENT, OR A SIMILAR DOCUMENT, IS  
COMPLETED, SIGNED AND SUBMITTED AS PART OF THE PROJECT APPLICATION.