

## APPLICATION FOR PERMIT TO OPERATE AS A MASSEUR OR MASSEUSE WITHIN THE CITY OF GREENWOOD, INDIANA

Section 4-93 of the Greenwood Municipal Code states "It shall be unlawful for any person, including one who holds a massage establishment permit, to engage in the practice of massage without a permit issued by the Chief of Police."

"Any person desiring the permit required by this Division shall file an application for said permit with the Chief of Police upon a form provided by said Chief and shall pay a filing fee of Five Dollars (\$5.00), which shall not be refundable." Section 4-94, Greenwood Municipal Code.

Section 4-95 of the Greenwood Municipal Code requires all of the following information as part of the application for a masseur or masseuse permit within the City of Greenwood. A permit application which does not include all of the following information shall be deemed incomplete, and said permit shall be denied for incompleteness, with no refund of the permit application fee.

APPLICANT					
Name:				Today's Date:	
Address:				L	
DOB:	SSN:	Height:	Weight:	Eye Color:	Hair Color:
				,	
Home phone:	Work phone:	Cell phone:	Other phone:		

State your business, occupation, or employment history for the last three (3) years immediately preceding the date of application:

Name of Employer/Business	Location/Address	Phone Number	Title/Occupation	Dates

(Additional application information may be attached to permit application.)



	of School	Location/Address	Major/Program	Did you complete the program? If so, list type of degree or certificate	Dates attended
cense Hi	story:				
		under a license in this or	any other city or state?	☐ Yes or ☐ No	
	ense suspended?		☐ Yes or ☐ No		
Vas that lice	ense revoked?			☐ Yes or ☐ No	
	answered "Yes" or revoked.	to the above questions	, state the business activi	ity or occupation from which yo	our license was
ave you ev	ver been convict	ed of a crime (other tha	n minor traffic violations)	? Yes or No	
vou answe	ered "Yes" to the	above question, list th	e date and nature of the	offense(s):	
Date of Offense	Offense		Location	Court of Conviction	Sentence
	ck of this page if	needed.)			
Ise the ba					
	cant must provide	do the following as an	attachment to the nermi	it application:	
ach applic	•		attachment to the permi	• •	
ach applic	1) Written proc	of you are at least eig	hteen (18) years of age.		, cuch as the
ach applic	(1) Written proc (2) A set of fing	of you are at least eig erprints for each appli	hteen (18) years of age.	• •	/, such as the
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Name and address of any post-secondary college, university, training or vocational school attended and the dates

