

City of Emeryville

1333 Park Avenue Emeryville, California 94608-3517 Tel: (510) 596-4300 | Fax: (510) 596-4389

APPLICATION FOR MASSAGE ESTABLISHMENT

Businesses/Persons interested in applying for a permit for a massage establishment within the City of Emeryville must complete the attached application and submit with all supporting documents to:

City of Emeryville Police Department Attn: Police Chief 2449 Powell Street Emeryville, CA 94608

The information provided in this application shall be confidential, and shall not be subject to public inspection or disclosure, except as may be required by federal, state or local law or pursuant to valid subpoena or court order. Disclosure of information shall not be deemed a waiver of confidentiality by the applicant or any individual named in the application. The City shall incur no liability for the inadvertent or negligent disclosure of such information. Issued permits for massage establishments are not transferrable.

The Police Chief reserves the right to seek additional information from the applicant(s) as allowed under applicable law.

Massage Establishment

Emeryville Municipal Code. Title 5, Chapter 11

Applicants wishing to operate a massage establishment within the City of Emeryville shall provide the following information, under penalty of perjery, and shall sign and affirm the minimum standards of qualification to operate a massage establishment located within Emeryville.

Name and address of the applicant(s).
Background check application for each applicant, business owner, and personnel/employee or evidence of certification by the Massage Therapy Council.
State of the nature and character of the business.

City of Emeryville | Police Department
Application for Massage Establishment

Proof and results of safety inspection of the business premises, as performed by a City Building Inspector within twelve (12) months prior to the date of the application. A certificate of occupancy issued within twelve (12) months prior to the date of the application shall satisfy this requirement.
Application fee payable to the City of Emeryville, as determined by the current Police Department Master Fee Schedule (see Page 3 of the application; fees subject to change).change).
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City of Emeryville Master Fee Schedule Police Department

Effective July 3, 2017

DESCRIPTION		FEE
Report & Document Reproduction		
Citizen Request, Per Page [12]	\$	0.10
Crime/Accident Report-Insurance Company, Per Page [12]	\$	0.10
Computer Generated Report from Police Department CAD/Records Management System, Per Page [2,12]	\$	0.10
Faxing, Per Page [12]	\$	0.10
Identification Services		
Fingerprinting	\$.	162
DVD Copy of Communications Voice	\$	162
Vehicle Release Certificate Fee [5] (Except recovered/stolen vehicle)	\$	178
Stolen Vehicle Release	\$	
Permit & Application Fees		
Alarm Application Fees (Commercial Alarms only) [6] one time initial fee	\$	162
Cabaret Permit Annual Application Fee [7] (Due, each December 1st)	\$	1,425
One Day Cabaret Permit	\$	855
One Day Dance Hall Permit	\$	570
Bingo Game Permit	\$	428
Card Room Fees: Card Room Annual License Application [7] (Due, each December 1st)	\$	2,851
Card Room Employee Permit 1. Application Fee 2. Renewal Fee 3. Replacement/Change Card Room	\$ \$ \$	385 142 142
Taxicab Drivers' Permit Fees 1. Application Fee 2. Application Renewal Fee 3. Driver's Identification Card Replacement Fee	\$ \$	162 162 80
Fleet Management Permit Fees 1. Application Fee 2. Substitution/Additional Fee for each additional vehicle not listed on Fleet	\$	324
Management Permit Application	\$	324
Vehicle Permit Fees 1. Application Fee 2. Certified Copy of Emeryville Police Department Vehicle Inspection Report (to be used	\$	80
by other cities)	\$	48 40
3. Vehicle Replacement Card Fee	\$	40
Special Event Permit Fees Without a street closure With a street closure	\$ \$	276 340

City of Emeryville Master Fee Schedule Police Department

Effective July 3, 2017

DESCRIPTION		FEE	
SESSIAI HOI		1111	
Peddler - Vendor - Catering Truck Permit Fees			
1. Application Fee	\$	285	
2. Renewal Fee	S	285	
3. Replacement Fee	\$	85	
Massage Parlor and Massage Establishment Charges [8]:	•	4.470	
Annual Permit Application, due each December 1st	\$	1,179	
Massage Establishment Fee:			
Annual Permit Application, due each December 1st	\$	558	
Employee Permits			
Annual Employee Permit [3,4]			
(Applies to both Massage Partors and Massage Practitioners)			
(Due each October 1st for renewal by January 1st. Valid on a calendar year basis.)			
1. Application Fee	\$	447	
2. Renewal Fee	\$	447	
3. Replacement Fee	\$	48	
Dog License Fee			
For One Year - Not Spayed/Neutered	\$	20	
For Three Years - Not Spayed/Neutered	\$	31	
For One Year - Spayed/Neutered	\$	10	
For Three Years - Spayed/Neutered	\$	15	
For One Year - Seniors (55+) - Not Spayed/Neutered	\$	5	
For Three Years - Seniors (55+) - Not Spayed/Neutered	\$	10	
For One Year - Seniors (55+) - Spayed/Neutered	\$	2.50	
For Three Years - Seniors (55+) - Spayed/Neutered	\$	5	
Application for Concealed Weapon Permit, Police Investigation:			
			Penal Code Sec.22190
Background Investigation	\$	810	(b)(1) & (f)(1)
2. Dayshalaciaal Evamination if contracted by City	•	040	Penal Code Sec.22190
Psychological Examination, if contracted by City Range Certification	\$ \$	648	(b)(1) & (f)(1)
3. Range Ceruncation	Þ	2,851	
Application for Firearm Dealer Permit			
Background Investigation	\$	1,425	
Emergency Response Expenses (Alcohol/Drug Related)			
Arrest Only	S	1,425	
Arrest With Accident Investigation	\$	1,995	
Police Department Personnel Costs for Short Term Encroachments, Special	\$	285	
Short Term Encroachment Permit	s	285	
CHAIN ENGLOSIMICAL CHINA	•	200	
Personnel Services [9,10]	\$	162	
Cannabis Key Individual Application Fee	s	447	
Initial Cannabis Business Permit Fee	700	Cost	
mudi Garmadis Business i erinit i ee	1000	covery	
Renewal of Cannabis Business Permit Fee	\$	651	
	0 5 6		
Firearms Storage Fee [17]	\$	485	
Rollico Non Swam Hourty Rolls		160	
Police Non-Swom Hourly Rate	\$	162	
Police Sworn Hourly Rate	2	285	

APPLICANT INFORMATION

If there are more than four (4) applicants for this business, please complete and print out additional applicant pages and include them in your application packet.

Applicant 1			
Full Name			
Street Address	City	State	Zip Code
Home Phone No.	Cell Phone No.		
Applicant 2			
Full Manna			
Full Name	_	, (====1	
Street Address	City	State	Zip Code
Home Phone No.	Cell Phone No.		
Applicant 3			
Full Name			
T dii Name			
Street Address	City	State	Zip Code
Curder, reduced	Oity		Zip oode
Home Phone No.	Cell Phone No.		
Applicant 4			
Full Name	8		
Street Address	City	State	Zip Code
Home Phone No	Cell Phone No		

BUSINESS INFORMATION

Business/Organization	n Name	
Business Owner/Repr	resentative Name	
Business Address	City	State Zip Code
Contact Phone No.	Alterna	ate Contact Phone No.
Describe the nature a	and character of your business	s.
personnel/employees with the application pa	nnel/employees, please inclu must complete a background	ide on the back of this form. All d check form application and submit
Full Name		Contact Phone No.
Full Name		Contact Phone No.
Full Name		Contact Phone No.
Full Name		Contact Phone No.
Full Name		Contact Phone No.
•		pplication, and supporting documents as all to the extent of my knowledge.
Signature	Print Name	Date