

## TOWN OF COLONIE OFFICE OF THE CHIEF OF POLICE

312 WOLF ROAD LATHAM, NEW YORK 12110 (518) 783-2744 www.colonie.org/departments/police



## APPLICATION FOR MASSAGE BUSINESS PERMIT

§127-2 - No person shall engage in or carry on the business of massage unless he or she has a valid massage business permit issued by the Town pursuant to the provisions of this chapter for each and every separate office or place of business conducted by such person.

**Exemptions** – The provisions of this chapter shall not apply to:

- hospitals, nursing homes, sanatoriums or persons holding an unrevoked certificate to practice the healing arts under the laws of the state or persons working under the direction of any such persons or in any such establishment,
- 2) **barbers or cosmetologists** lawfully carrying out their particular profession or business and holding a valid, unrevoked license or certificate of registration issued by the state
- 3) persons holding valid licenses issued under the provisions of Article 155 of the Education Law.

Business Name:		
Business Address:		
Business Phone:		
Business Owner:		
Type of Ownership (Individual/Partner.	ship/Corporation/etc.):	
	First Name:	
Applicant Phone: (W)	(Cell)	
Email Address:		
Character References: References must	be adult residences of the county other than relativ	es and business associates.
1. Last Name	First Name:	<i>M.I.</i> :
Address -		

2.	Last Name	First Name:	<i>M.I.</i> :	
	Address			
3.	Last Name	First Name:	<i>M.I.</i> :	
	Address			
Applic		own of Colonie (no cash), as well as other parameters of the cash	_	
Addit	ionally, applicants are required to	Furnish the following:		
	(1) Written proof of age			
	(2) Two front-face portrait photographs taken within 30 days of the date of application and at least $2"x\ 2"$ in size.			
		er than misdemeanor traffic violations, fued, and the offense for which convicted a	•	
		ubmit fingerprints electronically with Ide et about setting up an appointment for fi	• •	
	(5) Diploma, certificate or other theory, method, profession of	written proof of graduation from a recor work of massage is taught.	gnized school where the	
		a licensed physician in the state that he be free of all communicable diseases.	has examined the applicant	
Penal	Law.	punishable as a class A misdemeanor pursi	uant to section 210.45 of the	
Appli	cant Signature:			
Please	Print Name:		Date:	
Returr	to: Town of Colonie Police Departm	ent - 312 Wolf Road - Latham, N.Y. 12110 –	Attn. Massage Permit	
Office	Use Only			
Applic	eation Approved / Denied By:		Date:	
Fee Re	eceived By:		_ Date:	