

## City Clerk's Office

# City of South St. Paul Massage Therapist License

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\$100.00 Fee plus \$25.00 Background Check Per Applicant Proof of Insurance and Training

		Section 1: A	pplicant
1.	Print Name:Last	First	Middle
	Phone ()	E-mail:	
2.	Place of Birth	Date	of Birth:
3.	Business name		Phone ()
	Address		
	riddess		
4.	Minnesota Business Tax ID Number		Applicant's Social
	(if applicable)		Security Number (Required by MN Statutes 270C.72)
	Federal Business Tax ID Number		
5.	Do you have a valid driver's license?	Yes	No
	Driver's License number:	S	tate
	If no:		
	ID Card Number:	5	State
	If several employees will be conducting		
	ii severai empioyees wiii de conducting	business within the City	, please complete Section 3.
6.	Do you drive a vehicle in connection with	h this work? If yes, des	cribe the vehicle: Yes No
	Color Make	_ Model	Year
	State license plate number:		
	Section 2 Pr	oof of Workers'	Compensation Coverage
	Section 2 110	out of workers	Compensation Coverage
		Please complete at	ttached form.
		r	
	anuary 2017		

8.	Have you been licensed as a massage therapist in another municipality? Yes No  If yes, please list municipalities:
9.	Have you had a massage therapist license denied or revoked by the City or any other other government body within three years before this application date?  YesNo  If yes, provide the details and locations.
10.	Hours that business will be open:
11.	Have you ever been convicted of any felony, crime or violation of any ordinance other than a minor traffic offense? If yes, provide the time, place, offense and penalty imposed Yes No
	If you are conducting your business out of your home, you must apply for a permit with the City Planner prior to issuance of a Massage Therapist License.  Contact: Peter Hellegers at 651-554-3217
	For office us only:
Date	e Received:
	ount Paid:
Acc	count #:

## BACKGROUND INVESTIGATION CONSENT RELEASE

As a license applicant, I hereby give my consent for a personal background investigation, to include a criminal history check, to be used in the determination of whether my application is to be approved. The results of such investigation shall be made public pursuant to appropriate City Council approval or denial of the license application. I understand that I am under no legal obligation to consent to such investigation, but that my refusal to so consent may be the basis for denying my application.

TENNESSEN WARNING: In connection with your request for a license, the City has asked that you provide information about yourself which may be classified as private, confidential, nonpublic, or protected nonpublic under the Minnesota Government Data Practices Act. This means that this data is not ordinarily available to the general public. Accordingly, the City is required to inform you of the following:

- The purpose and intended use of the information requested is to determine if you are eligible for a license from the City of South St. Paul.
- You are not legally obligated to supply the requested information.

Date Received: \_\_\_

Insurance Submitted: \_\_\_\_ yes \_\_\_\_ no

Transient Merchant: Copy of County License must be submitted with application

- The known consequences of supplying the requested information is that the information or further investigation could disclose information which could cause your application to be denied.
- The known consequences of refusing to supply the requested information is that your request for a license cannot be processed.
- A criminal charge, arrest, or conviction will not necessarily bar you from obtaining a license with the City, unless the conviction is related to the matter for which the license is sought, according to Minnesota Statute 364.03. However, failure to reveal the requested criminal information will be considered falsification of the application and may be used as grounds for the denial of the application.
- · Other governmental agencies necessary to process your application are authorized by law to receive the information provided.
- The City is required by law to furnish some of this information to the Department of Labor and Industry and the Minnesota Commissioner of Revenue.

The undersigned, by signing this notice, acknowledges that he/she has read and understood the contents of this notice.

Print Applicant	Full Name (First, Middle, Last):	
Applicant Date	of Birth (mm/dd/yyyy):	
Data		
Date:	Applicant signature	
These .	statements are true, correct and are made with the knowledge that this information may be made public.  False disclosures are subject to perjury proceedings and forfeiture of the license application.	
D. COL.	I	Remit 1
Receipt Number:		

Office of the City Clerk License Division 125 Third Avenue North South St. Paul, MN 55075 Phone: (651) 554-3239

Fax: (651) 554-3211

## Certificate of Compliance—Minnesota Workers' Compensation Law

Minnesota Statute, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in an activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. The information required is: the name of the insurance company, the policy number, and dates of coverage or the permit to self-insure. This information will be collected by the licensing agency and retained in their files.

This information is required by law, and licenses and permits to operate a business may not be issued or renewed if it is not provided and/or is falsely reported. Furthermore, if this information is not provided or falsely stated, it may result in a \$1,000 penalty assessed against the applicant by the Commissioner of the Department of Labor Industry.

Insurance Company Name (not the agent)	Policy Number:					
Dates of Coverage:						
to						
	OR .					
REASON FOR EXEMPTION FRO	OM WORKERS' COMPENSATION					
If you have questions regarding the need to obtain workers' comp (651) 284-5032 or (800) 342-5354.	pensation coverage, including exemptions, contact					
I am not required to have workers' compensation liability coverage	ge below:					
<ul> <li>I have no employees. (See Minn. Statutes 176.011, subd. 9 for the definition of an employee)</li> <li>I am self-insured for workers' compensation (attached a copy of the authorization to self– insure from the Minnesota Department of Commerce).</li> <li>I have no employees but they are not covered by the workers' compensation law (See Minn. Statutes 176.041 for a list of excluded employees.)</li> </ul>						
I certify that the information provided above is accurate and compeffect at all times as required by law.	plete and that a valid workers compensation policy will be kept in					
any changes in ownership. I further authorize the City or its Ve application. I understand that the purpose of permitting the City issuance of a Business License in the City of South St. Paul. requested data, but that by refusing to comply, my license applications.	to the best of my knowledge. I hereby agree to notify the City of endor and other City Officials to investigate all facts set out in this to have access to this information is to determine my suitability for I further understand that I am not legally required to supply the ation may be denied. Your residence address and telephone number ion to be private and provide an alternative address and telephone					
Date of Application:	(x) Signature of Applicant					

## CITY OF SOUTH ST. PAUL REQUIREMENTS FOR INSURANCE CERTIFICATES

			CEDTIEICA	TE OF LIABILITY	/ INCLIDANCE					
PRO	DUCER		CERTIFICATE OF LIABILITY INSURANCE							
Agency Address City, State, Zip  Certificate cannot be Pending, Declaration, Quote or Binder.		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER.								
Oity,	otate, zip		AFFORDED BY TH	E POLICIES BELO	W.	ALTER THE COVER	AGE			
INSU	RED	-Licensee	INSURERS AFFOR	DING COVERAGE				NAIC#		
11400	KLD	-dba Trade Name	INSURER A:							
		-Licensed Address (or licensed	INSURER B:							
		address in description below) ** Name must be listed exactly	INSURER C: INSURER D:							
			INSURER E:							
THE NOT\	WITHSTANDING A	URANCE LISTED BELOW HAVE BI NY REQUIREMENT, TERM OR CO	ONDITION OF ANY C	ONTRACT OR OTH	HER DOCUMEN	T WITH RESPECT TO	WHICH TH			
		ISSUED OR MAY PERTAIN, THE I AND CONDITIONS OF SUCH POL						IHE		
INSR			POLICY	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE			See Back Side for rance Coverage Amounts		
LTR		PE OF INSURANCE	NUMBER	(MM/DD/YY)	(MM/DD/YY)		IIISU	LIMITS		
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		<del></del>				MED EXP (any one pe	erson)	\$		
						PERSONAL & ADV IN	JURY	\$		
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	POLICY	PROJECT LOC				PRODUCTS-COMP/C		\$		
	AUTOMOBILE LI	ABILITY				COMBINED SINGLE	_IMIT	\$		
	ANY AUTO	AUTOO				(ea accident)				
	ALL OWNED					BODILY INJURY		\$		
	SCHEDULEI HIRED AUTO					(per person) BODILY INJURY		\$		
	NON-OWNE					(per accident)		Þ		
	HION-OWNE	DAOTOS				PROPERTY DAMAGE	:	\$		
						(per accident)	-	Ψ		
	GARAGE LIABIL	ITY				AUTO ONLY-EA ACC	IDENT	\$		
	ANY AUTO					OTHER THAN	EA ACC	\$		
						AUTO ONLY:	AGG	\$		
	EXCESS/UMBRE	LLA LIABILITY				EACH OCCURRENCE		\$		
	OCCUR	CLAIMS MADE				AGGREGATE		\$		
	DEDUCTIBL	F						\$		
	RETENTION							\$		
	EMPLOYERS' LI					WC STATU- TORY LIMITS	OTHER			
	ANY PROPRIETO OFFICER/MEMBI	DR/PARTNER/EXECUTIVE				E.L. EACH ACCIDEN E.L. DISEASE-EA EM		\$ \$		
	If yes, describe ur					E.L. DISEASE-POLIC		\$		
	SPECIAL PROVIS	SIONS below								
	OTHER		Insurance must ful dates) -or- may sta			cense for specific uous Until Cancelled.	'			
DES	L CRIPTION OF OPE	ERATIONS / LOCATIONS / VEHICL	L ES / EXCLUSIONS /	ADDED BY ENDOR	L RSEMENT/SPE	L CIAL PROVISIONS				
CER	TIFICATE HOLD	DER	CANCELLATION							
					RIBED POLICES	BE CANCELLED BEF	ORE THE E	EXPIRATION		
	OF SOUTH ST. P.		DATE THEREOF, T	HE ISSUING INSU	RER WILL ENDE	AVOR TO MAIL 10 D	AYS WRIT	TEN		
125 3RD AVENUE NORTH SOUTH ST. PAUL, MN 55075			NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.							
			<b>AUTHORIZED REP</b>	RESENTATIVE						

Sec. 18-39. - Bond and insurance.

## (a) Insurance.

- (1) When a licensee or permittee is required to have in force a policy of insurance, the policy must be approved as to substance and form by the city. The policy must provide that it may not be cancelled without ten days' written notice to the clerk. The coverage must at least be for the term of the license or permit. Satisfactory evidence of coverage by insurance must be filed with the clerk before the license or permit will be issued.
- (2) Unless otherwise provided by this Code, a required policy of comprehensive liability insurance must provide for protection in at least the following amounts: \$200,000.00 for injuries including death therefrom sustained by any one person; \$600,000.00 for injuries including death resulting therefrom sustained by two or more persons as the result of any one occurrence; \$100,000.00 for property damage.
- (3) Worker's compensation. Coverage as required by Minn. Stat. § 176.181, subd. 2.
- (b) *Bonds.* If a bond is required for a license or permit, the bond must be a corporate surety bond executed on a form approved by the city attorney and filed with the clerk before the license or permit is issued. Except as otherwise provided in this Code, a bond must be in the amount of \$3,000.00, conditioned that the licensee or permittee will comply with the applicable code sections and laws pertaining to the licensed or permitted activity and that the licensee or permittee will indemnify the city and save it harmless from all loss or damage by reason of inadequate work performed by the licensee or permittee or by reason of accident caused by the negligence of the licensee or permittee and agents or employees of the licensee or permittee. The bond must provide that it may not be cancelled except upon ten days' written notice to the clerk.

(Ord. No. 1289, § 2, 3-16-2015)

ARTICLE XIII. - MASSAGE THERAPY

**DIVISION 1. - GENERALLY** 

Sec. 18-300. - Exceptions.

This article shall not apply to any person duly licensed in this state to practice medicine, surgery, osteopathy, chiropractics, physical therapy, or podiatry, or to licensed registered nurses, athletic directors or trainers. This article shall not apply to beauty culturists and barbers who do not give or hold themselves out to give massage treatments other than is customarily given in such shops or places of business for the purpose of beautification.

(Code 1992, § 1125.12, subd. 11)

Sec. 18-301. - Inspections.

- (a) Any duly authorized law enforcement officer, health officer or building inspector shall be allowed to inspect the premises at which a license has been granted at reasonable times and hours to insure compliance with all provisions of this article.
- (b) Upon demand by any police officer, any person engaged in providing services in any premises at which a license has been granted shall give the person's true legal name and correct address.

(Code 1992, § 1125.12, subd. 9)

Sec. 18-302. - Restriction involving minors.

No person under the age of 18 years shall be permitted at any time on the premises at which a license has been granted as a patron or guest, unless accompanied by the person's parent or legal guardian. No person under the age of 18 years shall be employed by a licensee.

(Code 1992, § 1125.12, subd. 10)

Secs. 18-303—18-322. - Reserved.

**DIVISION 2. - LICENSES** 

Sec. 18-323. - Licenses, fees.

(a) *Business license*. No person, partnership, corporation or entity shall engage in or carry on a business a principal part of which is for massage therapy within the city without being licensed as provided in this section.

- (b) *Personal service license.* No person shall perform massage services within the city without being licensed as provided in this subsection.
- (c) *License fee.* The annual license fee for a massage therapy business license and the annual license fee for a personal service license shall both be as established in <u>chapter 26</u> of this Code.

(Code 1992, § 1125.12, subd. 1)

Sec. 18-324. - Business license application.

A person desiring a business license shall file a written application with the city clerk. The applicant shall tender with the application the correct license fee and shall, in addition, furnish the following:

- (1) The type of ownership of the business, whether individual, partnership, corporation or otherwise.
- (2) The name and designation under which the business or practice is to be conducted.
- (3) The business address and all telephone numbers where the business is to be conducted.
- (4) A complete list of the names and residence addresses of all employees in the business and the names and residence addresses of the managers or other persons principally in charge of the operation of the business.
- (5) The following personal information concerning the applicant, if an individual; and concerning each stockholder holding more than five percent of the stock of the corporation, each officer and each director, if the applicant is a corporation; and concerning the partners, including limited partners, if the applicant is a partnership; and concerning the manager or other person principally in charge of the operation of the business:
  - a. Name, complete residence address and residence telephone numbers.
  - b. The massage or similar business history and experience, including, but not limited to, whether or not such person in previously operating in this or another city or state under license or permit has had such license or permit denied, revoked or suspended and the reason therefor, and the business activities or occupations subsequent to such action of denial, suspension or revocation.
  - c. All criminal convictions or arrests of the applicant other than misdemeanor traffic violations, fully disclosing the jurisdiction in which convicted or arrested; and the offense for which convicted or arrested and the circumstances thereof.
- (6) The name, address and phone number of two adult residents of the state who may be called upon to attest to the applicant's character.

(7)

Written declaration by the applicant, under penalty of perjury, that the foregoing information contained in the application is true and correct, said declaration being duly dated and signed in the city.

(Code 1992, § 1125.12, subd. 2)

Sec. 18-325. - Insurance coverage.

- (a) The applicant shall file with the city clerk a certificate of insurance from an insurance company duly licensed and qualified to do business in the state on a form approved by the city attorney. Where liability insurance is required, the insurance policy certified shall provide the following coverage in not less than the amounts hereinafter provided:
  - (1) Comprehensive general liability.
    - a. Bodily injuries, including death resulting therefrom, sustained by any one person: \$100,000.00 and \$300,000.00 per any one occurrence.
    - b. Property damage liability: \$100,000.00 per occurrence.
  - (2) Worker's compensation. Coverage as required by Minn. Stat. § 176.181, subd. 2.
- (b) The insurance shall not be cancelled or changed without 30 days prior written notice to the city clerk by certified mail. The certificate of insurance shall be continuously in effect until 30 days after receipt of said written notice of cancellation or change, provided, however, said certification shall not extend for more than six years.

(Code 1992, § 1125.12, subd. 3)

Sec. 18-326. - Personal service license application.

A person desiring a personal service license shall file a written application with the city clerk. The applicant shall tender with the application the correct license fee and shall, in addition, furnish the following:

- (1) The business address and all telephone numbers where the service is to be practiced or based.
- (2) The following personal information concerning the applicant:
  - a. Name, age, complete residence address and telephone numbers.
  - b. The massage, or similar business history and experience, including, but not limited to, whether or not such person in previously operating in this or another city or state under license or permit has had such license or permit denied, revoked or suspended and the reason therefor, and the business activities or occupations subsequent to such action of denial, suspension or revocation.

c.

All criminal convictions or arrests other than misdemeanor traffic violations, fully disclosing the jurisdiction in which convicted or arrested, and the offense for which convicted or arrested and the circumstances thereof.

- d. The name, address and phone number of two adult residents of the state who may be called upon to attest to the applicant's character.
- (3) Authorization for the city, its agents and employees to seek information and conduct an investigation into the truth of the statements set forth in the application and the qualifications of the applicant for the permit.
- (4) Written declaration by the applicant, under penalty of perjury, that the foregoing information contained in the application is true and correct, said declaration being duly dated and signed in the city.

(Code 1992, § 1125.12, subd. 4)

Sec. 18-327. - Educational requirements.

With the application, each applicant shall furnish proof of the following:

- (1) A certificate of national certification; or
- (2) A diploma or certificate of graduation from an American Massage Therapist Association approved school and proof of a minimum of 100 hours of course work in massage therapy. Proof of course work in massage therapy may be in the form of notarized affidavits of the applicant and, where applicable, notarized affidavits of the applicant's supervisor or employer of the licensing authority where the applicant engaged in the practice of massage.

(Code 1992, § 1125.12, subd. 5)

Sec. 18-328. - Investigations.

- (a) Upon the city clerk receiving the application for a business or personal service license, the police chief shall conduct an investigation into the applicant's personal and criminal history. The police chief may require a personal interview of the applicant, and such further information as shall bear on the investigation.
- (b) In the case of applications for business licenses, the police chief and building inspector shall cause to be conducted an investigation of the premises where the massage business is to be carried on, for the purpose of assuring that such premises comply with all the sanitation requirements as set forth in this article and with the regulations of public health, safety and welfare.

(Code 1992, § 1125.12, subd. 6)

Sec. 18-329. - Issuance or denial of business license.

(a) Recommendation; notice; determination by city council. Before any business or personal service license ("license") shall be issued, the police chief and building inspector shall submit their recommendation to the city council. The city council shall instruct the city clerk to cause to be published in the official newspaper no less than ten days in advance of the hearing, a written notice of public hearing to be held, the name of the applicant, the premises where the business is to be conducted, the nature of the business and such other information as the city council may direct. After the hearing, the city council shall either grant or deny the license.

### (b) Denial.

- (1) Licenses may be granted only in the appropriate zoning districts to be determined by the city council in accordance with the laws and ordinances of the city.
- (2) Licenses shall be granted only for premises that can meet the safety and sanitary requirements of the city council and the building code regulations of the city.
- (3) It shall be grounds for denial of a license if there is any fraud or deception involved in the license application.
- (4) It shall be grounds for denial of the application if the applicant or persons in their employ are not complying with or have a history of violations of laws and ordinances that apply to health and safety.
- (5) A license shall not be granted to a person who has been convicted of criminal prostitution or similar sex offenses, or to a partnership, corporation or entity that has in its employ or is owned by any persons convicted of similar criminal acts.

#### (c) Revocation.

- (1) It shall be grounds for revoking a license granted to any person, partnership, corporation or entity under this ordinance if they fail to comply with this Code, statutes or regulations of the state or of the United States.
- (2) It shall be grounds for revoking a license granted to any person, partnership, corporation or entity under this article if the owners, managers, lessee or any of the employees are found to be in control or possession of any alcoholic beverages, narcotic drugs or controlled substances, as defined by Minnesota Statutes, on the premises occupied by the licensee.
- (3) It shall be grounds for revoking a license if the owner, manager, lessee or any of the employees of a licensee are convicted of any ordinance or state laws violation arising within the business premises for which the license was granted under this division.
- (4) It shall be grounds for revoking a license granted under this division if the premises do not comply with the health, safety and building regulations of the city.

(Code 1992, § 1125.12, subd. 7)

Sec. 18-330. - License renewal.

A license may be renewed annually by the city council upon completion of an abbreviated renewal application form, as determined by the city clerk, payment of the license fee, and proof of current liability insurance for a license. Renewal applications will be referred to the police chief and building inspector for their recommendation to the city council. If the city council deems it in the public interest to do so, the council may order that a renewal application be subjected to the same types of investigation as required for initial application.

(Code 1992, § 1125.12, subd. 8)

Secs. 18-331—18-348. - Reserved.