



## LINCOLN POLICE DEPARTMENT

770 7th Street – Lincoln, CA 95648

Phone: (916) 645-4040 <https://www.lincolncal.gov/>



### APPLICATION FOR MASSAGE BUSINESS PERMIT

Section 5.32 of the Lincoln Municipal Code requires any person(s) desiring a permit to operate a massage establishment to submit to the Chief of Police an application. An applicant for a permit shall submit, as part of the application process, the following information.

The following checklist is provided to help the applicant in providing a completed application. If any required information is missing or incomplete, the application will be returned to the applicant. A notice will be attached defining the information missing or incomplete.

1. Completed Application Form;
2. Live Scan (new business owners only);
3. Proof of a valid CAMTC (California Massage Therapy Council) issued massage practitioner permit for each massage professional employed at or intended to be employed at the establishment;
4. Copy of each massage practitioner's government issued photo ID;
5. Proof of current general liability insurance policy for the business providing minimum coverage of \$1,000,000;
6. Copy of lease agreement for business space (must include the name and address of the property owner, and will have an acknowledgment that the property owner approves of a massage establishment at the proposed location). Certificate of occupancy issued by the City of Lincoln building department.
7. Fee:
  - New: \$800
  - Renewal: \$250

**Permit valid for one year after approval date.**



## Lincoln Municipal Code Acknowledgment Form LMC 5.32 - Massage Establishment Requirements

Lincoln Police Department 770 7th Street, Lincoln, CA 95648

916-645-4040 / [INVESTIGATIONS@LINCOLNCA.GOV](mailto:INVESTIGATIONS@LINCOLNCA.GOV)

Establishment Name:	Address:
Business Owner:	Phone #:
Business Manager:	E-mail:

### Read Each LMC and Initial Each Box



(NOTE: This is a selection of common LMC violations, and it is NOT an all-encompassing list of all violations per LMC 5.32)

<b>LMC 5.32.170 A</b>	It is unlawful and a public nuisance to own, conduct, control, or operate a massage establishment unless the owner or manager designated in the application for the massage establishment is present within such massage establishment at all times.	
<b>LMC 5.32.170 B</b>	An owner and/or manager shall be responsible for the conduct of all massage professionals while they are on the massage establishment premises. Any act or omission of any massage professional, whether an employee or an independent contractor, constituting a violation of the provisions of this chapter, shall be deemed an act or omission of the owner or manager for the purposes of determining whether the massage business permit shall be revoked, suspended, conditioned, denied, or renewed.	
<b>LMC 5.32.170 C</b>	No massage professional shall provide massage of the genitals or anal region of any client or the breasts of any female client without the written consent of the female client and a referral from a licensed California health care provider, nor shall any owner or manager of a massage business allow or permit such massage to the above specified areas. A massage shall not be given and no client shall be in the presence of a massage professional, independent contractor, owner, manager, or other employee of a massage business unless the client's genitals and the female client's breasts are fully covered by a non-transparent covering.	
<b>LMC 5.32.170 D</b>	The hours of operation of the massage establishment must be posted in the front window, or on the door if there is no front window, and clearly visible from the outside.	
<b>LMC 5.32.170 E</b>	The owner and/or manager shall ensure that the CAMTC certificate for each on-duty massage professional is conspicuously displayed, visible from the entrance and/or reception and waiting area of the massage establishment, and that each massage professional has at his or her immediate disposal the CAMTC photo identification card at all times when working in the massage establishment. Such identification shall be provided upon request of a member of the public, the CAMTC, a member of law enforcement, or a city official.	
<b>LMC 5.32.170 F</b>	No owner and/or manager shall employ or retain any person as a massage professional who does not have an active and valid CAMTC certificate. Every owner or manager shall report to the chief of police any change of employees or independent contractors, whether by new or renewed employment, discharge or termination, on the form and in the manner required by the chief of police. The owner or manager shall provide the name of the employee or contractor and the date of hire or termination within 14 calendar days of the date of hire or termination.	
<b>LMC 5.32.170 G</b>	All owners, managers, massage professionals, other employees and independent contractors of the massage business shall be fully clothed at all times while furnishing massage services. No such individual shall dress while engaged in the practice of massage for compensation in any manner as outlined in Section <a href="#">5.32.120</a> . Dressing while engaged in the practice of massage for compensation or while visible to clients in a massage establishment, in any of the following: Attire that is transparent, see-through, or substantially exposes the massage professional's undergarments. Swim attire, if not providing a water based massage modality approved by the CAMTC. A manner that exposes the massage professional's breasts, buttocks, or genitals.	

<b>LMC 5.32.170 I</b>	The massage establishment shall be open to inspection by the chief of police, the fire chief, the building official, or their authorized representatives during normal business hours of the massage establishment.	
<b>LMC 5.32.180 C</b>	Each owner and/or manager shall post and maintain a list of services available and the cost of such services in the lobby of the massage establishment in a conspicuous public place. The services shall be described in English. No owner or manager shall permit, and no person employed or retained by the massage business shall offer to perform, any services or charge any fees other than those posted.	
<b>LMC 5.32.180 D</b>	The interior of the massage establishment shall maintain adequate illumination to make the conduct of employees, independent contractors, and clients within the premises readily discernible. The lighting in each massage room shall be at least one, forty-watt white light bulb and shall be continuously activated at all times while the client is in a massage room. No strobe, flashing lights or dimmer switches shall be used. No colored lights shall be used nor shall any coverings be used which change the color of the primary light source.	
<b>LMC 5.32.180 H</b>	Any windows in the lobby shall not be covered. The lobby must be clearly visible from the exterior of the massage establishment at all times.	
<b>LMC 5.32.180 I</b>	Wet and dry heat rooms, shower rooms and bath and toilet rooms shall be thoroughly cleaned and disinfected as needed, but at least once each day the premises are open. All facilities for the massage establishment must be in good repair and shall be thoroughly cleaned and sanitized at least on a daily basis when the massage establishment is in operation.	
<b>LMC 5.32.190 B</b>	Shared use of towels or linen shall not be permitted. Towels and linen shall be laundered or changed promptly after each use. Separate enclosed cabinets shall be provided for the storage of clean and soiled linen and shall be plainly marked "clean linen" and "soiled linen" and shall have doors or covers.	
<b>LMC 5.32.190 C</b>	No person or persons shall be allowed to reside, dwell, occupy or live inside a massage establishment at any time. A kitchen, if any, shall be for the sole use of employees and independent contractors, and shall be installed in an "employees only" area.	
<b>LMC 5.32.190 F</b>	The presence of any device which can be utilized as an early warning system, to alert the employees or independent contractors of a massage business to the presence of law enforcement officers or city authorities is prohibited in any massage establishment. Said devices may include, but are not limited to, light or music dimmers, electronic detection devices, external or internal video equipment and alarm systems other than those used for fire alarms.	
<b>LMC 5.32.190 G</b>	Each massage establishment shall provide to all clients clean, sanitary, and opaque coverings of a minimum size of thirty inches by sixty inches, capable of covering the clients' specified anatomical areas, including but not limited to the genital area, buttocks, and female breasts. No shared use of such covering shall be permitted, and re-use is specifically prohibited unless adequately cleaned prior to its re-use.	
<b>LMC 5.32.190 H</b>	Every owner and/or manager shall keep a record of the dates and hours of each treatment or service, the name and address of the client as confirmed by valid identification, the name of the massage professional administering such service and a description of the treatment or services rendered. These records shall be prepared prior to administering any massage or treatment and shall be retained for a period of two years after such treatment or service. These records shall be open to inspection upon demand only by officials charged with enforcement of this chapter or emergency personnel for emergency purposes and for no other purpose. The police department may periodically inspect the records to ensure compliance with this section.	
<b>LMC 5.32.190 I</b>	Hours of Operation. No massage establishment shall be open for business except during the hours of 6:00 a.m. to 10:00 p.m. on any day.	
<b>LMC 5.32.190 J</b>	All exterior doors (accept a rear entrance for staff only) and interior doors must remain unlocked during business hours, unless there is no massage business staff available to assure the security of clients and massage professionals who are behind closed doors.	

<b>LMC 5.32.190 K</b>	Dress Code for Clients and Visitors. Except for a client who is inside a massage therapy room for the purpose of receiving a massage, no clients or visitors shall be permitted in or on the massage establishment premises at any time who are not fully clothed in outer garments of nontransparent material, or who display or expose themselves in underclothing, sheer clothing, or similar intimate apparel.	
<b>LMC 5.32.190 L2</b>	No massage business shall place, publish or distribute or cause to be placed, published or distributed any advertising matter that: Depicts any portion of the human body that would reasonably suggest to prospective clients that any service is available other than legitimate massage services. Depicts individuals in suggestive poses that would reasonably suggest to prospective clients that any service is available other than legitimate massage services. Employs language in the text of any advertising that would reasonably suggest to prospective clients that any service is available other than legitimate massage services. Advertise on a website known to advertise or promote illegal activities.	
<b>LMC 5.32.210 A</b>	Every massage business permit issued pursuant to this chapter shall be conspicuously displayed so that it may be easily seen by any client or other person on the massage establishment premises.	
<b>LMC 5.32.210 B</b>	Any person providing massage services or out-call massage services shall have an active and valid CAMTC certificate and CAMTC photo identification card readily available for inspection at all times while providing such services, and shall show the certificate and identification card to any member of the public, the CAMTC, a member of law enforcement, or a city official upon request.	
<b>LMC 5.32.030 A</b>	It is unlawful for any person to own, conduct, operate or maintain a massage business within the city without having a valid massage business permit issued pursuant to this chapter. Massage business permits shall also be required of any permanent or semi-permanent seated massage or reflexology installation. A massage business permit shall in no way be construed to allow any person to perform massage services within the city without an active and valid certificate from the CAMTC as a massage practitioner or massage therapist.	
<b>LMC 5.32.030 B</b>	It is unlawful for any person to own, conduct, operate or maintain a massage business within the city unless all persons providing massage services at a massage establishment each hold an active and valid certificate from the CAMTC as a massage practitioner or massage therapist.	

**See LMC 5.32 for full ordinance text**

**By signing below, I hereby acknowledge that I have read LMC 5.32 and understand the requirements pertaining to the operation of massage establishments in Lincoln.**

**I understand that if I, or any employee, are found in violation of LMC 5.32, there could be civil penalties, criminal penalties, and/or a suspension, revocation, or denial of any massage business permit.**

<b>Print Name:</b>	<b>Date:</b>
<b>Signature:</b>	



## Massage Business Permit

Lincoln Police Department  
770 7th Street, Lincoln, CA 95648  
916-645-4040

New Application     Renewal

### Massage Establishment Information

The applicant corporation or partnership shall designate one of its officers or general partners to act as its responsible managing officer. Such designated person shall complete and sign all application forms for this establishment.

Massage Establishment Name \_\_\_\_\_  
(Precise name under which business is to be conducted)

Complete Address of Massage Establishment \_\_\_\_\_  
Street Address \_\_\_\_\_  
Establishment Telephone Number(s) (\_\_\_\_\_) \_\_\_\_\_ Zip \_\_\_\_\_

### Ownership of Massage Establishment/Business

Complete business ownership information is required. Each person involved in the management of the massage establishment (designated manager) is required to complete a Supplemental Questionnaire. Please provide the following information:

Indicate type of business ownership (check one):  Sole Proprietor  Partnership  Corporation  Other: \_\_\_\_\_  
(Please completely fill in the section below appropriate to the ownership of your business)

#### SOLE PROPRIETOR:

Owner Name \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Owner Telephone Number(s) (\_\_\_\_\_) \_\_\_\_\_  
Home (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

#### PARTNERSHIP OR JOINT VENTURE: This form must be signed by one general partner or by a participant if a joint venture

Is this a limited partnership? YES \_\_\_\_\_ NO \_\_\_\_\_  
(If yes, provide copy of Certificate of Limited Partnership filed with the State) Is one or more partner a corporation? YES \_\_\_\_\_ NO \_\_\_\_\_  
(If yes, also fill out the corporation section for all applicable Officers of corporation)

Name(s) and residence addresses of each current partner including limited partners (Use another sheet if needed)

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

#### CORPORATION: This form must be signed by one officer or one director designated to act as a responsible managing officer

Name of Corporation \_\_\_\_\_ State of Incorp. \_\_\_\_\_ Date of Incorp. \_\_\_\_\_  
(Name must be set forth exactly as shown in articles of incorporation or charter) (mm/dd/yyyy)

Name(s) and residence addresses of each current Officer and Director and of each stockholder holding more than 5% of the stock of the Corporation (Use another sheet if needed)

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Description of any other business operated on the same premises or within the City of Lincoln or the State of California that is owned or operated by the Applicant**

**Property Owner Information**

Please enter the name and address of the owner and lessor of the real property upon or in which the business is to be conducted. In the event the applicant is not the legal owner of the property, the application must be accompanied by a copy of the lease and a notarized acknowledgment from the property owner that a massage establishment will be located on the owner's property

**Property Owner** \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_  
**Owner Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**Phone Number ( )** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Submittal Requirements**

1. The applicant, if a corporation or partnership, shall designate one or more of its officers or partners to act as manager during business hours. If the applicant is an individual, then that individual or designee shall act as manager. Each person who will serve as manager will complete and sign a Supplemental Questionnaire.
2. If during the term of a permit, the permit holder has any change in information submitted on the original or renewal application, the permit holder shall notify the Police Department of such change, within fourteen (14) business days thereafter, in writing.

**Business Owner/ Operator/ Manager Information**

**Applicant Name** \_\_\_\_\_  
(Full, complete and true name) Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

**All Other Names Used** \_\_\_\_\_  
(Aliases or Maiden names)

**Applicant Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Applicant Mailing Address** \_\_\_\_\_  
(If different from Residential Address) Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Home Phone No. ( )** \_\_\_\_\_ **Work Phone No. ( )** \_\_\_\_\_ **Cell Phone No. ( )** \_\_\_\_\_  
(Include all that apply)

**Are You At Least 18 Years of Age? YES** \_\_\_\_\_ **NO** \_\_\_\_\_ **I am a** \_\_\_\_\_ **Business Owner** \_\_\_\_\_ **Operator/Manager**

**Qualifying Proof of Legal Residency** \_\_\_\_\_  
(And/or the ability to legally work in the United States – examples include birth certificate, immigration status, social security card, travel visa, etc.)

**Gender** \_\_\_\_\_ **Height** \_\_\_\_\_ **Weight** \_\_\_\_\_ **Hair Color** \_\_\_\_\_ **Eye Color** \_\_\_\_\_  
(Feet/inches) (Lbs.)

**Please Enter All Previous Residential Addresses for Five (5) Years Immediately Prior to Current Residential Address – List Most Recent Address First (Use an additional sheet if needed)**

**Previous Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

**Previous Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

**Previous Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

**Previous Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

**Previous Residential Address** \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

Please Enter Employment History For Five (5) Years Preceding This Application – List Most Recent Employer First (Use an additional sheet if necessary)

Business Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Position Title and Job Responsibilities \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Position Title and Job Responsibilities \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Position Title and Job Responsibilities \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Position Title and Job Responsibilities \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
dd/mm/yyyy dd/mm/yyyy

Address \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Please List All Criminal Convictions Occurring in Any State or Country Including Any Plea of Nolo Contendre, Including Those Dismissed or Expunged Pursuant to Penal Code §1203.4, but Excluding Traffic Infractions or Violations.

Date of Conviction \_\_\_\_\_ Place of Conviction \_\_\_\_\_ Reason \_\_\_\_\_  
dd/mm/yyyy

Date of Conviction \_\_\_\_\_ Place of Conviction \_\_\_\_\_ Reason \_\_\_\_\_  
dd/mm/yyyy

I certify under the penalty of perjury of the laws of the State of California, that all the information provided in this application is true and correct. My signature also authorizes the City of Lincoln, its staff and agents to seek information and conduct investigations, including but not limited to a records check of prior convictions into the truth of the statements set forth in the application and my qualifications for the permit. I also certify under the penalty of perjury of the laws of the State of California that I have received a copy of City of Lincoln Ordinance chapter §5.32 and understand its contents as well as the duties of a massage establishment manager/applicant as provided in the chapter. I further understand that an incomplete or unsigned application will not be processed.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

## Massage Establishment Employee List

**Instructions:** List each employee that works for the establishment. Include all non-massage employees. Copies of state identification must be attached for all employed at the establishment (including owner(s) and administrators). For massage practitioners, in addition to including their state identification, the current certification from the CAMTC as certified massage therapist or as a certified massage practitioner and the CAMTC-issued identification card for each employee will need to be provided.

Massage Establishment Name: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Massage establishment permits. (d) Requirement to Amend Massage Establishment Permit Application. Whenever the information provided in the application for massage establishment permit on file with the city changes, for example by a change in employees, the operator shall, within 10 business days after such change, file an amendment to the massage establishment permit application with the Lincoln Police Department to reflect such change. (LMC 5.32)