



CITY OF PORTLAND
Permitting and Inspections Department
Application for Massage Therapist License
License expires annually on September 30th

<input type="checkbox"/> Application Fee: \$45 <input type="checkbox"/> Massage Therapist License: \$38 <input type="checkbox"/> Renewal Fee: \$35 <input type="checkbox"/> SBI Background Check: \$21/principal officer

ALL APPLICANTS: Please submit 2 passport size photos, taken in the last 30 days and a copy of your State of Maine Massage Therapist License.

Business Information			
Business Name or Applicant Name (if no business name):			
Business Address:			
Mailing Address:			
Applicant Email:		Phone:	
Owner of Business Premises:			
Address of Premises Owner:			
Hours of Operation:			

Sole Proprietor/Partnership Information (If Corporation, leave blank)

Name of Owner(s)	Date of Birth	Residence Address

Corporate/LLC/Non-Profit Organization Applicants (If Sole Proprietor or Partnership, leave blank)

Corporate Name		Corporate Mailing Address		
Principal Officers	Title	Date of Birth	Residence Address	



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Does the Issuance of this license directly or indirectly benefit any City employee(s)? Y/N

If Yes, list name(s) of employee(s) and department(s):

Does the application, or any officer of a corporate applicant, or any partner, or any person having actual ownership interest or management authority in this business, have any convictions for any offenses, other than traffic violations, during the past 5 years? Y/N

If Yes, please explain:

NEW APPLICANTS: Please submit one of the following:

1. Evidence of completion of formal training course in massage therapy by recognized school. (or)
2. Evidence of 100 hours of on the job training performed in the presence of a licensed massage therapist. (or)
3. Evidence of continuous practice as a massage therapist for at least 1 year, accompanied by the written recommendation of at least 5 persons holding a valid massage therapist license, (or)
4. Evidence of successful completion of a certifying exam given by another municipality or state or of the certifying exam given by American Massage Therapist Association.

Please read and sign:

- All therapeutic massage must be administered on a massage table, treatment table, or treatment mat, and must be kept in a clean and sanitary condition.
- Massage therapists can operate between the hours of 6am and 12am ONLY.
- A massage therapy establishment must, when open to the public, have a licensed massage therapist on premises at all times. The establishment must keep a written list of all employee names and addresses, both on and off duty and said list must be shown upon request.
- A massage therapy corporation must be registered in the State of Maine.

Any principal officer/owner/massage therapist may not have a disqualifying criminal conviction in the last 5 years and must be at least 18 years of age. Applicant, by signature below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above license and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted. Applicant agrees that all taxes and accounts pertaining to the premises will be paid prior to issuance of the license.

It is understood that this and any application(s) shall become public record and the applicant(s) hereby waive(s) any rights to privacy with respect thereto.

I/We, hereby authorize the release of any criminal history record information to the City Clerk's Office or licensing authority. I/We, hereby waive any rights to privacy with respect thereto.

Signature

Date

For more information about Massage Therapist licenses, please see Portland City Code Chapter 16 at: www.portlandmaine.gov.

For Administrative Use Only

Amount: _____	Request Date / Approval	Notes: _____
Date Paid: _____	SBI: _____/_____	_____
CC _____ CA _____ CK _____	SBI #: _____	_____
	Treasury: _____/_____	_____
Amount: _____	PD: _____/_____	_____

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