



APPLICATION FOR BUSINESS LICENSE - **MASSAGE**

(This is NOT a Business License)

City of Holladay

4580 S. 2300 E.
Holladay, Utah 84117
Phone: (801) 527-3890
Fax: (801) 527-3890

APPLICATION #: _____

Utah State Sales Tax ID Number: _____ --STC
(Please be sure this number is coded to the City of Holladay)

PLEASE PRINT CLEARLY AND FIRMLY AND FILL OUT COMPLETELY

Please provide all items required within 30 days of this application submittal or this application is considered null and void.

***Does this business require any Utah State or Federal license or contract? If yes, please attach.**

Business Name/DBA: _____ Business Phone: _____

Business Location (No PO Boxes): _____ Holladay, UT Zip: _____

Mailing Address (if different from above): _____ City/State: _____ Zip: _____

Applicant's Name: _____ Date of Birth: _____

Permanent Residence/Local Address: _____ City/State: _____ Zip: _____

E mail: _____ Other Phone: _____

Opening Date At This Location: _____ Is this a new type of business at this location? Yes No

Business Activity/Type: _____ Location Type: Residential Commercial

Utah State License Number: _____ Expiration Date: _____

Property Owner / Management Name: _____ Phone: _____

Property Owner / Management Address: _____

TYPE OF OWNERSHIP

Sole Owner: Name: _____

Partnership: Name(s) of General Partners: _____

Corporation: Name of Principal Officer: _____

Name of Corporation: _____

Other: Describe: _____

Address of Owner(s)/Partner/Principal Officer: _____ City/State: _____ Zip: _____

Federal EIN #: _____ Utah State Entity (optional): _____

It is unlawful to operate a business without a current license (Holladay Municipal Ordinance Section 5.606.020). Failure to obtain a business license prior to opening such business will result in a penalty being assessed (Holladay Municipal Ordinance Section 5.06.100).

It is the responsibility of the Licensee to be familiar with the ordinances under which this license is applied, and applicant hereby agrees to conduct said business strictly in accordance with the Laws and Ordinances covering such business

All applications of business license are to be renewed yearly, on the anniversary date of original issue. Licenses renewed 30 days after the anniversary date of original issue will be assessed a penalty.

The Licensee is responsible for renewal each year. Failure to receive a renewal notice does not excuse this responsibility.

Signature: _____ Print Name: _____ Date: _____

PLEASE FILL OUT NUMBER OF EMPLOYEES – OTHER LINES ARE FOR OFFICE USE ONLY

Number of Employees: _____ (No charge)

License Fee: \$ **300.00**

Vehicles/Units: \$ _____

Penalty: \$ _____

Zoning: \$ _____

Category Fees & Codes:

Code	Description	Units	Amount
163	Personal Services		\$300.00
_____	_____	_____	_____
_____	_____	_____	_____

Total \$: 300.00

Ncsalpha #: _____

Parcel ID#: _____

Zone: _____

Approving Signature: _____

- SLCo Health Fire Police DBA Tax Coded Fee
- Zoning Professional License Conditional Use Photo
- Work Card BCI Driver's License

COMMENTS:

MASSAGE THERAPY APPLICATIONS

The City of Holladay has some additional requirements for massage therapy applications. Please read Chapter 5.62.010 in the City of Holladay code for all the information, procedures and other information before submitting an application to practice massage therapy in the City of Holladay. For a complete massage therapy business license application, you will need to submit the following:

- Fee of \$300.00
- Background check from Utah BCI within 60 days of application
- 2 passport sized photos or email a headshot photo
- Copy of Driver's license
- Copy of Professional License for Massage Therapy from DOPL

The application can also be obtained from City Hall from the City's website. Please return the application along with other applicable information and fees to:

Attention: Business License Official
4580 S 2300 E
Holladay, UT 84117

If you have questions please call 801-527-3890.

The Salt Lake County Health Department will also need to be contacted for inspection of the premises.

Please contact them at:

2001 State Street S2400
Salt Lake City, UT 84190
(385) 468-4100
<http://slcohealth.org/>