



Chief of Police
MICHAEL D. WOODS

TOWN OF COLONIE
OFFICE OF THE CHIEF OF POLICE

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



Deputy Chiefs
ROBERT H. WINN
JAMES J. GERACE

APPLICATION FOR MASSEUR'S PERMIT

§127-2 - No person shall practice massage as a masseur, employee or otherwise, unless he or she has a valid and sustaining masseur's permit issued to him by the Town pursuant to provisions of this chapter.

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

- 1) **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.**

Applicant Last Name: _____ First Name: _____ M.I.: _____

Home Address: _____

Phone Number: (H) _____ (Cell) _____

Email: _____ D.O.B. _____

Height: _____ Weight: _____ Color of Hair: _____

Color of Eyes: _____ Sex: _____

Business Name Where Massage Is To Be Practiced: _____

Business Address: _____

Business Phone: _____

Previous Addresses Immediately Prior To Your Present Address:

Address #1: _____

Address #2: _____

A check of \$10.00 made payable to the Town of Colonie (no cash) must accompany this application to cover the clerical costs and investigation.

Additionally, 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.*
- (3) *All criminal convictions other than misdemeanor traffic violations, fully disclosing the jurisdiction in which convicted, and the offense for which convicted and the circumstances thereof.*
- (4) *Applicants are required to submit fingerprints electronically with IdentoGO by MorphoTrust USA. See Informational Sheet about setting up an appointment for fingerprints.*
- (5) *Diploma, certificate or other written proof of graduation from a recognized school where the theory, method, profession or work of massage is taught.*
- (6) *A statement, in writing, from a licensed physician in the state that he has examined the applicant and believes the applicant to be free of all communicable diseases.*

Notice: False statements made herein are punishable as a class A misdemeanor pursuant to section 210.45 of the Penal Law.

Applicant Signature: _____

Please Print Name: _____ **Date:** _____

Return to: Town of Colonie Police Department - 312 Wolf Road - Latham, N.Y. 12110 – Attn. Massage Permit

OFFICE USE ONLY

Application Approved / Denied By: _____ Date: _____

Fee Received By: _____ Date: _____