



City and County of San Francisco  
**DEPARTMENT OF PUBLIC HEALTH**

**OCCUPATIONAL & ENVIRONMENTAL HEALTH**

Edwin M. Lee, Mayor  
Barbara A. Garcia, MPA  
Director of Health

Rajiv Bhatia, M.D., M.P.H  
Director of EHS & OSH

Police Department Permit Section  
850 Bryant Street, Rm 458  
San Francisco, CA 94103  
Phone: 553-1115 M-F, 9AM-12noon and 1PM-3PM

Date: \_\_\_\_\_

Subject: **BACKGROUND CHECK AND CLEARANCE FOR MASSAGE APPLICANT**

We have received the following applicant's information for

- Outcall Service
- Massage Establishment.
- Massage Practitioner.

Applicant Name: \_\_\_\_\_

Doing Business  
As (DBA): \_\_\_\_\_

Facility Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Identification No.: \_\_\_\_\_

TYPE OF IDENTIFICATION NO.  
SS# (required) and one of the  
following:  
DL# \_\_\_\_\_ (state) or  
ID# or Passport #

May we please have your recommendation in the space provided below:

A preliminary criminal background query has indicated:

- The applicant has not been convicted of any offenses outlined in San Francisco Health Code Section 1913(b)(4). **(APPROVED)**
- The applicant has been convicted of one or more of the offenses outlined in San Francisco Health Code Section 1913(b)(4). **(DENIED)**
- Other (see below):

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed by: \_\_\_\_\_  
INSPECTOR (PRINT) STAR # SIGNATURE

Telephone no: \_\_\_\_\_ Date: \_\_\_\_\_

**SFPD CHARGES \$165.00 FOR BACKGROUND CHECK. APPLICANT NEEDS TO BE PRESENT.  
SUBMIT THIS FORM AND PAYMENT IN PERSON TO SFPD. CHECKS OR MONEY ORDER ONLY. NO CASH.**