

FOR CITY USE ONLY

PLANNING DIVISION

Approval

Conditional Approval

Denial

Comments: _____

Signature: _____ Date: _____

BUILDING AND SAFETY DIVISION

Approval

Conditional Approval

Denial

Comments: _____

Signature: _____ Date: _____

POLICE DEPARTMENT - Required for all Massage Establishments

Approval

Conditional Approval

Denial

Comments: _____

Signature: _____ Date: _____

FIRE DEPARTMENT

Approval

Conditional Approval

Denial

Comments: _____

Signature: _____ Date: _____