

Application to Renew Massage and Special Treatment Licence 2020-21



This form should be fully completed, signed and sent to:

Hammersmith & Fulham Council
Environment Dept Food and Safety Team
Hammersmith Town Hall
King Street London W6 9JU

☎ 020 8753 1081 ✉ mst@lbhf.gov.uk

See www.lbhf.gov.uk/mst for guidance on how to comply with the revised Standard Conditions dated 1 March 2020

This box is for office use only.
Licence number
Date Form Received
Fee Paid £
Date fee paid
DC / CC

1) I/We apply to Hammersmith & Fulham Council to RENEW a Massage and Special Treatment Licence

TRADING AS NAME:

ADDRESS:

POSTCODE:

CONTACT NAME:

PREMISES TELEPHONE NUMBER:

EMAIL:

2) Individual Licensee (complete if applicable)

(if more than one licensee please attach additional sheet with this application)

FULL NAME OF APPLICANT:

Mr / Mrs / Ms / Miss / other....

HOME ADDRESS OF APPLICANT:

POSTCODE:

PERSONAL TELEPHONE/ MOBILE NUMBER:

EMAIL:

DATE OF BIRTH:

PLACE OF BIRTH:

3) Company Details (complete if applicable)

Registered Company Name	
Companies House Registration Number	
Legal Status (Company Partnership, Sole Trader etc)	
Full names of Company Director (s)	Date of Birth and Place of Birth
1	1
2	2
Company Registered Address	Preferred postal address for correspondence
	Preferred email address for correspondence

4) You must send a copy of this application form to the Police and Fire Brigade		
Hammersmith & Fulham Licensing Unit Metropolitan Police Service ✉ AWMailbox.Licensing@met.police.uk	By: EMAIL	Date:
Fire Safety Regulation Hammersmith, Fulham & Richmond London Fire Brigade ✉ firesafetyregulationSW@london-fire.gov.uk	By: EMAIL	Date:

5) Conduct and management of the premises

Will the applicant be personally in charge of conduct and management when the premises is open?	Yes / No
Who will be the nominated responsible person acting for the licence holder when the licence holder is not at the premises?	Name: Job Title:
How many staff will be employed at the premises?	Full time: Part time:
Who do you intend to offer treatments to?	Men only / Women only / Men and Women
Give full details of general waste disposal company and frequency of collection	
Give full details of special waste disposal company (needles, swabs etc) and frequency of collection	

6) Safety Certification and premises information

Gas safety certificate (annual) Find an engineer at 0800 408 5500 or www.GasSafeRegister.co.uk	Date of inspection..... Company..... Gas Safe Registration number..... Engineer name..... Gas Safe Registration number.....
Electric installation inspection (periodic) Information at www.hse.gov.uk/electricity	Date of inspection..... Company name..... Electrician name..... Next inspection due date.....
Electrical appliances testing (annual) Information at www.hse.gov.uk/electricity	Date of inspection..... Company name..... Electrician name.....
Fire Risk Assessment for the premises Information at www.london-fire.gov.uk/FireRiskAssessment	Date completed..... Company name..... Assessor name..... Review due date.....
Give details	Number of treatment rooms..... Number of sunbeds..... Number of cosmetic laser/IPL/LED machines.....
Opening times	

7) Please tick the licensable treatments you intend to offer:

Acupuncture	<input type="checkbox"/>	Lipolysis	<input type="checkbox"/>	Sauna	<input type="checkbox"/>
Aromatherapy (blending of oils)	<input type="checkbox"/>	LED (light emitting diode)	<input type="checkbox"/>	Spa pool/Jacuzzi	<input type="checkbox"/>
Body massage	<input type="checkbox"/>	High power LED (over 500 mW)	<input type="checkbox"/>	Sports massage	<input type="checkbox"/>
Body piercing	<input type="checkbox"/>	Manicure	<input type="checkbox"/>	Steam room	<input type="checkbox"/>
Ear piercing	<input type="checkbox"/>	Microblading	<input type="checkbox"/>	Tattooing	<input type="checkbox"/>
Electrolysis	<input type="checkbox"/>	Microcurrent therapy	<input type="checkbox"/>	Thai massage	<input type="checkbox"/>
Facial steamer	<input type="checkbox"/>	Micropigmentation/permanent makeup	<input type="checkbox"/>	Therapeutic/holistic massage	<input type="checkbox"/>
Indian head massage	<input type="checkbox"/>	Nail extensions	<input type="checkbox"/>	Tuina	<input type="checkbox"/>
Infra-red treatments	<input type="checkbox"/>	Nose piercing	<input type="checkbox"/>	Ultra Violet tanning/sunbed	<input type="checkbox"/>
Intense pulse light (IPL)	<input type="checkbox"/>	Oxygen therapy	<input type="checkbox"/>	Ultra sonic treatments	<input type="checkbox"/>
Laser cosmetic rejuvenation	<input type="checkbox"/>	Pedicure	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Laser hair removal	<input type="checkbox"/>	Radio frequency	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Laser tattoo removal	<input type="checkbox"/>	Reflexology	<input type="checkbox"/>	Other:	<input type="checkbox"/>

8) Please tick other treatments you offer which do not require licence or therapist registration:

Body wraps	<input type="checkbox"/>	Derma roller/pen	<input type="checkbox"/>	Injectables	<input type="checkbox"/>
Bleaching skin	<input type="checkbox"/>	Eyebrow shaping / tinting	<input type="checkbox"/>	Mesotherapy	<input type="checkbox"/>
Chemical skin peels	<input type="checkbox"/>	Eyelash treatments	<input type="checkbox"/>	Micro dermabrasion	<input type="checkbox"/>
Cupping	<input type="checkbox"/>	Ultrasound	<input type="checkbox"/>	Waxing or sugaring hair removal	<input type="checkbox"/>
Physiotherapy	<input type="checkbox"/>	Osteopathy	<input type="checkbox"/>	Chiropody	<input type="checkbox"/>

9) Therapists

Names of Therapists already registered:	Reference number on Registration Document e.g. 2019/00001/MSTTH	Treatments provided by the therapist
Names of new therapists to be registered (if any)	Application form, training certificates and fee enclosed/paid? State Yes or No	Treatments to be provided by the therapist/s

NOTE 1: Exemption from registration is no longer available for therapists working at a premises with a special treatment licence. Please provide a registration application for any therapists have previously been granted exemption. NOTE 2: Acceptable therapist qualifications have been updated. See guidance www.lbhf.gov.uk/mst

10)Declaration

DECLARATION	*Delete as appropriate
I/We declare that I/we have read and understood the Standard Conditions (version dated 1 March 2020) available at www.lbhf.gov.uk/mst	Yes / No
I/We enclose application forms for all therapists providing special treatments who require registration	Yes / No / Not applicable
I/We declare that the details given in this application are true to the best of my knowledge and belief	Yes / No
I/We confirm payment of the Massage and Special Treatment Licence renewal fee and Therapist Registration fee(s) has been made	Date paid by phone..... Amount paid £
I/We commit to take appropriate action to prevent modern slavery exploitation if there is any suspicion someone is a victim.	Yes / No
I/We declare that persons named on this application form have not been convicted of an offence under Part II of the London Local Authorities Act 1991	Yes / No
I/We acknowledge the following: <ul style="list-style-type: none"> • Failure to provide ALL the information requested and the fee in full will deem your application incomplete and the application will not be accepted. • You must stop massage and special treatments if application to renew has not been made before your current licence expires. • If application to renew is not received before the expiry date of the current licence, then application for a NEW Special Treatments Licence will have to be made. • Therapists must not carry out any licensable treatments until registration has been confirmed. • Engagement in any business activity seen to be connected to modern slavery or human exploitation can lead to licence renewal refusal. • The council's Data Protection Act and GDPR information is at www.lbhf.gov.uk/mst 	
Signed: Name:	Date:
I am the: Business Owner <input type="checkbox"/> Business Manager <input type="checkbox"/> Agent <input type="checkbox"/> Other.....	

11) Massage and Special Treatment Licence Fees

Licence/ Application Type	Part A Application fee	Part B Ongoing costs	Total Fee
New Licence application	£475	£291	£766
Licence Renewal	£245	£291	£536
Therapist Registration <i>Valid for 3 years</i>	£131	n/a	£131
Licence variation - removal or addition of permitted treatments; - change of trading name; - change of licensee name (not transfer to another person) <i>Payable at any time other than on renewal.</i>	£348	n/a	£348
Transfer of Licence	£341	n/a	£341
Occasional Licence <i>Up to 5 days duration</i>	£242	n/a	£242

12) Notes

Payment options

Telephone 020 8753 1081 to make a payment by Debit Card or Credit Card.

The fee structure explained

* Part A and Part B fees can be paid together at the beginning of the application process. Paying Part A and Part B with the application will mean that as soon as the applicant is advised the licence has been granted they can carry out treatments immediately.

* Part A covers the administration costs of processing the application. Part A must be paid when application is made. Part B is to cover other costs of the Massage and Special Treatment Licence service. This includes inspection and compliance visits, enforcement action and other costs not directly associated with the processing of the application. Part B is payable if the licence is granted.

* If Part B is not paid on application it will be a condition of the licence that Part B must be paid within 7 days of notification of the licence being granted. If Part B is not paid within 7 days the licence will not be valid and treatments covered by the licence must not be carried out. We strongly recommend that Part A and Part B are paid together.

Fee refunds

* If an application for a licence is not granted or if the applicant withdraws the application the Part A fee is not refundable. A refund for Part B minus a fee of £48 to cover Council administration costs can be made on written request from the applicant if it was paid on application. * If an annual licence is surrendered (for example if the business closes) a partial refund of the Part B fee only can be given to the Licence Holder. The value of the refund will be calculated as one-twelfth of the Part B paid for each complete month which remains unexpired at date of surrender minus an administration fee of £48. The date of surrender will be deemed to be the date the Council receives the paper licence. * If a licence is withdrawn by the Council (for example for non-compliance with licence conditions) no refund is payable. **Data protection**

The new Data Protection Act 2018 protects information that identifies you. The act ensures the UK's national data protection arrangements meet the EU General Data Protection Regulation (GDPR). For more information see <https://www.lbhf.gov.uk/business/food-safety/commercial-services-privacy-notice>