



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
INVESTIGATIVE SERVICES
INV369 - Massage Establishment**



File #
Insp #

NAME	LICENSE NUMBER	DATE OF INSPECTION	
DOING BUSINESS AS			
STREET ADDRESS		TELEPHONE #	EXT
CITY	COUNTY	STATE/ZIP	

Additional Information

Owner Contact

Last Name	First Name
Phone	

Inspection Employee Tracking

License Number	Person Employed
Date Entered	
License Number	Person Employed
Date Entered	
License Number	Person Employed
Date Entered	

License Relations

Designated Establishment Manager

Name	License #
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Establishment - Owner

Name	License #
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INV 369 – Massage Establishments

Massage Establishment Requirements

A designated establishment manager who meets requirements set forth in 480.033(6), F.S. is practicing at the location. [480.033(6), 480.043(12), F.S.] [64B-26.0035(1), F.A.C.]	
Current establishment license. [480.043(1), F.S.]	
Establishment license conspicuously displayed. (Photocopy not acceptable [64B7-26.003(1)(c), F.A.C.]	
If advertisement is visible at this establishment, must meet requirements of 480.0465, F.S. [64B7-33.001, F.A.C.]	
Safe/sanitary massage equipment maintained. [64B7-26.003(5)(a), F.A.C.]	
Massage table surface made of, or covered by, a non-porous, non-absorbent material that is free from rips or tears. [64B7-26.003(5)(b), F.A.C.]	
Employed person(s) duly licensed. [480.047(1)(c), F.S.]	
Each massage therapist's license conspicuously displayed and a 2-inch by 2-inch photo is attached by effective date required by rule. [64B7-23.003, 64B7-26.003(1)(d), F.A.C.]	
Garbage and refuse removal provided. [64B7-26.003(4)(a), F.A.C.]	
Safe storage/removal of flammable materials provided. [64B7-26.003(3)(b), F.A.C.]	
Premise fire extinguisher maintained in good working condition which meets the standards for inspection and maintenance as required by 69A-21.237, F.A.C. (Sprinkler system not acceptable substitute.) [64B7-26.003(3)(a), F.A.C.]	
Effective pest control measures are used. [64B7-26.003(4)(b), F.A.C.]	
Regular use of cleaners and bacterial agents or clean table covering utilized for each client. [64B7-26.003(5)(c)(d), F.A.C.]	
Maintain a sufficient supply of clean drapes for each patient receiving massage therapy treatment and launder all drapes and other materials used before reuse. [64B7-26.003(5)(e)(f), F.A.C.]	
Provide restroom facilities equipped with toilet tissue, soap dispenser with soap or other hand sanitizing agent, sanitary towels or other hand-drying device. [64B7-26.003(2)(a), F.A.C.]	
Maintain all bathroom and shower facilities and fixtures in good repair, well-lighted and ventilated. [64B7-26.003(2)(d), F.A.C.]	
Toilet facility on premises or in same building within 300 feet of establishment. [64B7-26.003(2)(a), F.A.C.]	
Lavatory in treatment room or within 20 feet for cleansing hands or chemical germicidal designed for use without running water. [64B7-26.003(2)(c), F.A.C.]	
Clean/adequate shower facilities with hot and cold running water if whirlpool bath/sauna (including wet, dry and infrared)/steam cabinet and/or steam room on premise. [64B7-26.003(2)(b)1., F.A.C.]	

INV 369 – MESSAGE ESTABLISHMENT

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Separation of shower facility from other facilities by means of a curtain or other visual divider if whirlpool bath/sauna (including wet, dry and infrared)/steam cabinet and/or steam room on premise. [64B7-26.003(2)(b)2., F.A.C.]	
Copy of current property damage and bodily injury liability insurance. [64B7-26.003(1)(a), F.A.C.]	
Human Trafficking signage is posted in a conspicuous place accessible to employees that is at least 11 inches by 15 inches in size, printed in a clearly legible font and in at least a 32-point type which gives instructions in English and Spanish on how to report to the National Human Trafficking Resource Center. [64B7-26.003(1)(e), F.A.C.] [456.0341, 480.043(13), F.S.]	
Procedure in place for reporting suspected human trafficking to the National Human Trafficking Hotline or to a local law enforcement agency and a sign posted in a conspicuous place in the establishment which is accessible to employees with the relevant provisions of the reporting procedure. [480.043(13), F.S.]	
If requested, valid government identification was immediately presented upon request. [480.0535(1), (2), F.S.]	
Establishment operating hours are within compliance. [480.0475(1), F.S.]	
Is this establishment being used as a principal domicile in an area zoned for commercial use? [480.0475(2), F.S.]	

Colonic Irrigation

Licensed massage therapist or apprentice licensee properly certified to perform colonic irrigation. [64B7-25.001(2), F.A.C]	
Colonic irrigation equipment maintained in sanitary and safe working condition. [64B7-26.003(6)(a), F.A.C.]	

Apprentice Program

Apprentice under supervision of licensed sponsoring massage therapist. [64B7-29.003(1), F.A.C.]	
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Establishment Equipment Required in Addition to 64B7-26 for Apprentice Program

Tables for massages. [64B7-29.003(2)(a), F.A.C.]	
Linen and storage area. [64B7-29.003(2)(b), F.A.C.]	
Colonic hydrotherapy equipment if colonic hydrotherapy irrigation is taught. [64B7-29.003(2)(c), F.A.C.]	
Sterilization equipment if non-disposable colonic attachments are utilized. [64B7-29.007(2)(c), F.A.C.]	
Hydrotherapy equipment including hot/cold packs. [64B7-29.003(2)(c), F.A.C.]	
Appropriate textbooks and teaching materials. [64B7-29.003(2)(d), F.A.C.]	

Remarks:

I have read and have had this inspection report and the law and regulations concerned herein explained and do affirm that the information given herein is true and correct to the best of my knowledge.

Inspector Signature:

Establishment Representative Signature:

Date:

Date: