

IMPORTANT CHANGES TO MASSAGE AND BODYWORK REGULATIONS IN THE BOROUGH OF METUCHEN

On November 24, 2025, Ordinance 2025-20 regarding Massage and Bodywork Establishments was adopted by Borough Council. The complete ordinance can be found at www.metuchennj.org under Departments, Borough Clerk, 2025 Ordinances. To request a print copy, please email dzupan@metuchen.com.

As per Ordinance 2025-20:

- Only five (5) massage/bodywork establishments will be permitted in the Borough. Additionally, no new massage business can open within 500 feet of an existing massage business.
- The annual establishment renewal fee for established businesses is \$500; initial registration for a new business is \$1000.
- The annual individual therapist fee is \$100.
- All therapists must submit their application to the Borough Clerk in person. Please email dzupan@metuchen.com to schedule.
- Proof of liability insurance must accompany all establishment applications.

License Application for Massage, Bodywork, or Somatic Therapy Establishment

IS YOUR ESTABLISHMENT REGISTERED WITH THE NEW JERSEY BOARD OF MASSAGE AND BODYWORK THERAPY? YES _____ NO _____ IF YES, PROVIDE PROOF OF REGISTRATION.

TYPE OF OWNERSHIP (CIRCLE 1):

INDIVIDUAL PARTNERSHIP CORPORATION OTHER _____

PLEASE PROVIDE COMPLETE INFORMATION FOR EACH OWNER, PARTNER, OFFICER, AND/OR ANY INDIVIDUAL OWNING MORE THAN 10% OF THE BUSINESS

NAME	ADDRESS	DATE OF BIRTH	PHONE
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CONTINUE ON SEPARATE SHEET IF NECESSARY

- ✓ FOR EACH PERSON NAMED ABOVE ATTACH A COPY OF CURRENT GOVERNMENT-ISSUED PHOTO ID

HAS THIS ESTABLISHMENT OR ANY MANAGER, OWNER, OR PARTNER HAD A MASSAGE LICENSE OR PERMIT DENIED, REVOKED, OR SUSPENDED IN THIS OR ANOTHER STATE? YES _____ NO _____ IF YES, PLEASE PROVIDE DETAILS ON A SEPARATE SHEET.

HAVE ANY OF THIS ESTABLISHMENT'S MANAGERS, OWNERS, OR PARTNERS BEEN COVICTED OF A CRIME (OTHER THAN TRAFFIC VIOLATIONS)? YES _____ NO _____ IF YES, PLEASE PROVIDE DETAILS ON A SEPARATE SHEET, INCLUDING THE JURISDICTION IN WHICH THE CRIME WAS COMMITTED AND THE CIRCUMSTANCES.

- ✓ PLEASE ATTACH PROOF OF THE ESTABLISHMENT'S LIABILITY INSURANCE.

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I, _____, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF NEW JERSEY THAT ALL THERAPISTS EMPLOYED BY, TO BE EMPLOYED BY, OR OTHERWISE PERMITTED TO WORK AT THE ABOVE STATED ESTABLISHMENT HAVE BEEN LICENSED BY THE STATE OF NEW JERSEY PURSUANT TO THE MASSAGE AND BODYWORK THERAPIST LICENSING ACT, N.J.S.A. 45:11-53 ET SEQ. AND N.J.A.C. 13:37-16, ET SEQ.

SIGNATURE: _____ DATE: _____

I, _____, DO HEREBY ATTEST THAT AS THE OWNER OR MANAGER OF THE ABOVE STATED ESTABLISHMENT, I AM FAMILIAR WITH ORDINANCE 2025-20 (ORDINANCE AMENDING CHAPTER 120 OF THE CODE OF THE BOROUGH OF METUCHEN, ENTITLED, "MASSAGE, BODYWORK AND SOMATIC THERAPY ESTABLISHMENTS") AND DO HEREBY AGREE TO COMPLY WITH THE REGULATIONS AND RESTRICTIONS AS PUT FORTH BY THE BOROUGH.

SIGNATURE: _____ DATE: _____

FOR BOROUGH USE ONLY

DATE FEE PAID _____ CHECK # _____ CASH _____

NAME OF INSURANCE COMPANY _____ EXP DATE _____

ZONING OFFICIAL DATE

HEALTH INSPECTOR DATE

BUILDING INSPECTION OFFICER DATE

POLICE CHIEF DATE

FIRE OFFICIAL DATE

BOROUGH CLERK DATE

PERMIT # _____