

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.



BOROUGH OF METUCHEN

CLERK'S OFFICE

732-632-8508 dzupan@metuchen.com 500 Main St., Metuchen, NJ 08840

**LICENSE APPLICATION FOR MASSAGE, BODYWORK,
OR SOMATIC THERAPIST**

THERAPIST NAME: _____

HOME ADDRESS: _____

HOME/CELL PHONE: _____ EMAIL: _____

TWO PREVIOUS ADDRESSES:

NAME AND ADDRESS OF METUCHEN BUSINESS WHERE THERAPIST IS EMPLOYED:

MASSAGE THERAPY OR SIMILAR BUSINESS EMPLOYMENT HISTORY:

IDENTIFYING INFORMATION

AGE: _____ HEIGHT: _____ WEIGHT: _____ GENDER: _____
HAIR COLOR: _____ EYE COLOR: _____

- ✓ PLEASE ATTACH A COPY OF CURRENT GOVERNMENT-ISSUED PHOTO ID.
- ✓ ATTACH TWO FRONT FACE PHOTOGRAPHS TAKEN WITHIN THE LAST THIRTY DAYS, AT LEAST 2 BY 2 INCHES IN SIZE.

PLEASE PROVIDE THREE ADULT RESIDENTS OF MIDDLESEX COUNTY AS CHARACTER REFERENCES. REFERENCES MAY NOT BE FAMILY MEMBERS OR BUSINESS ASSOCIATES.

NAME	ADDRESS	TELEPHONE/EMAIL
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- ✓ PLEASE ATTACH ONE OF THE FOLLOWING:

A COPY OF A VALID CERTIFICATION OR LICENSE ISSUED BY THE NEW JERSEY BOARD OF MASSAGE AND BODYWORK THERAPY; OR

SUCCESSFUL COMPLETION OF STUDY OR COURSEWORK AND/OR CERTIFICATE OR CERTIFICATION IN THE FIELD OF MASSAGE, BODYWORK OR SOMATIC THERAPY FOR WHICH THE APPLICANT WILL BE EMPLOYED AND TO BE UTILIZED IN AN APPROVED MASSAGE, BODYWORK AND SOMATIC THERAPY ESTABLISHMENT; OR

SUCCESSFUL COMPLETION OF THE WRITTEN EXAMINATION OFFERED BY THE NATIONAL CERTIFICATION BOARD FOR THERAPEUTIC MASSAGE AND BODYWORK.

License Application for Massage, Bodywork, or Somatic Therapist

HAVE YOU HAD A MASSAGE OR SIMILAR BUSINESS LICENSE OR PERMIT DENIED, REVOKED, OR SUSPENDED?

YES _____ NO _____ IF YES, PLEASE PROVIDE DETAILS ON A SEPARATE SHEET.

HAVE YOU BEEN CONVICTED 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.

I, _____, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF NEW JERSEY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE: _____ DATE: _____

FOR BOROUGH USE ONLY

DATE FEE PAID _____ CHECK # _____ CASH _____

POLICE CHIEF _____ DATE _____

BOROUGH CLERK _____ DATE _____

PERMIT # _____