

In compliance with Governor Newsom's Executive Order N-29-20, which suspended portions of the Brown Act, Governor Newsom's Executive Order N-33-20 (Stay At Home Order issued March 19, 2020), and the County of Los Angeles Public Health Officer's Reopening Safer at Work and in the Community for Control of COVID-19 Blueprint for a Safer Economy – Tier 1 Surge Response (issued January 29, 2021), members of the Torrance License Review Board and staff will participate in the public meeting via teleconference or other electronic means in our continuing effort to practice social distancing to reduce the spread of COVID-19.

**BUSINESS PARTICIPANTS AND MEMBERS OF THE PUBLIC CAN VIEW THE AGENDA AT THIS LINK:**

<https://www.TorranceCA.Gov/government/city-clerk/commissions-and-advisory-boards/license-review-board/agendas/-folder-4938>

**BUSINESS PARTICIPANTS WILL BE ASKED TO PARTICIPATE IN THE LICENSE REVIEW BOARD MEETING WHEN THEIR BUSINESS NAME IS ANNOUNCED via Zoom by using the following link or by calling in with the phone number listed below:**

Link: <https://us02web.zoom.us/j/85001332161?pwd=MEpFWXBQSEJ5cFNBOVVDK0xvQWZpQT09>

Phone Number: 1-669-900-6833

Meeting ID: 850 0133 2161

Passcode: 823943

**TORRANCE LICENSE REVIEW BOARD**

**THURSDAY, FEBRUARY 18, 2021**

**REGULAR MEETING**

**10:00 A.M.**

**VIA TELECONFERENCE OR OTHER ELECTRONIC MEANS**

**AGENDA**

For questions contact: Suzanne Bittner, (310) 618-5923

Email address: [Revenue@TorranceCA.Gov](mailto:Revenue@TorranceCA.Gov)

1. CALL TO ORDER
2. ROLL CALL
3. MOTION TO ACCEPT AND FILE REPORT OF CITY CLERK ON POSTING OF AGENDA
4. APPROVAL OF MINUTES
5. BUSINESS LICENSE APPLICATIONS
  - A. MEDICAL SPA RETREAT, INC., DBA ESSENCIA TOTAL SPA, application for a business license to allow the operation of a massage establishment.
  - B. IRIX FOOT MASSAGE SPA, application for a business license to allow the operation of a massage establishment.
6. OTHER ITEMS
7. ORAL COMMUNICATIONS FROM THE PUBLIC
8. ADJOURNED **MARCH 4, 2021**

For business information during COVID19: [www.CityofTorranceCA.com](http://www.CityofTorranceCA.com)

For regular business: [www.TorranceCA.Gov](http://www.TorranceCA.Gov)

LICENSE REVIEW BOARD MEETING  
FEBRUARY 18, 2021

ITEM NO. 5. A. – MEDICAL SPA RETREAT, INC., DBA ESSENCIA  
TOTAL SPA

BACKGROUND

Hyekyong Lee owner of Medical Spa Retreat, Inc., DBA Essencia Total Spa has made an application for approval of a business license to allow the operation of a massage establishment. The business is located at 16612 Crenshaw Boulevard, in Torrance, California.

ANALYSIS

Per Section 31.7.3 subsection 25) of the Torrance Municipal Code, applications for a massage establishment must have License Review Board approval before issuance of the license.

RECOMMENDATION

All necessary documents have been received; therefore, the License Division recommends approval of the requested business license. The business will follow the City of Torrance, County of Los Angeles and State of California rules and regulations for the opening and operating a business during COVID-19.

- Attachment A: Business License Application
- Attachment B: Form 100E and Massage Therapist's Certificate
- Attachment C: Statement from Property Owner
- Attachment D: Police Department Reports

Please call the Business License Office at 310 618 5923 for fee amounts. Payment must be submitted with your application.



City of Torrance, Revenue Division  
 Business License Application  
 3031 Torrance Blvd, Torrance, CA 90503  
 (P) 310-618-5923 (F) 310-618-5852  
 revenue@torranceca.gov

SELECT APPLICABLE BOX:

NEW APPLICATION	<input type="checkbox"/>	CHANGE OF OWNERSHIP (greater than 50%)	<input checked="" type="checkbox"/>
CHANGE OF BUSINESS LOCATION	<input type="checkbox"/>	CHANGE OF NAME (Only)	<input type="checkbox"/>

**PART I. APPLICANT TO ANSWER ALL QUESTIONS IN THIS SECTION (print or type)**

BUSINESS NAME OR DBA <i>Essencia Total SPA</i>		CORPORATE NAME (LEGAL ENTITY NAME IF DIFFERENT FROM BUSINESS NAME OR DBA) <i>Medical SPA Retreat, Inc</i>	
1. BUSINESS LOCATION (*physical business address - see note below) <i>16612 Crenshaw Blvd</i>		Suite#	City <i>Torrance</i>
		State <i>CA</i>	ZIP <i>90504</i>
2. MAILING ADDRESS OR PO/PMB BOX (required) <i>Same as above</i>		Suite#	City <i>Torrance</i>
		State <i>CA</i>	ZIP <i>90504</i>
3. IS THE BUSINESS LOCATED AT A RESIDENTIAL ADDRESS (*select one)? YES <input type="radio"/> NO <input checked="" type="radio"/>		HOME OCCUPATION PERMIT#:	EMAIL ADDRESS: [REDACTED]
NATURE OF BUSINESS (description of business activity in detail): <i>MASSAGE, Acupuncture</i>			
FOR A BUSINESS LOCATED IN TORRANCE PROVIDE THE PRIMARY STANDARD INDUSTRY (SIC) CODE(S) (**see note below):		STATE WASTE DISCHARGER IDENTIFICATION NUMBER (WDID#) (**if applicable - see note below):	
TECHNOLOGY BUSINESS (select one): Definition: A business entity utilizing scientific equipment and engineering techniques, microelectronics, data processing, genetic engineering, or telecommunications.		YES <input type="radio"/>	NO <input checked="" type="radio"/>
RETAIL BUSINESS - WILL YOU BE SELLING CBD PRODUCTS? (select one): Definition: CBD is the cannabidiol compound derived from industrial hemp, cannabis or otherwise.		YES <input type="radio"/>	NO <input checked="" type="radio"/>
CONTACT NAME: <i>HyeKyong Lee</i>	CONTACT TITLE: <i>owner</i>	BUSINESS PHONE#: <i>310-819-8970</i>	[REDACTED]
DRIVERS LICENSE OR OTHER GOVERNMENT ISSUED ID# [REDACTED]	SOCIAL SECURITY# (optional):	COMMERCIAL OFFICE SQFT:	# OF PEOPLE WORKING IN TORRANCE: <i>1</i>
FE [REDACTED]	STATE TAX ID# (SEIN):	STATE CONTRACTORS LICENSE #:	STATE SELLERS PERMIT#:
OWNERSHIP (check applicable box): CORPORATION <input checked="" type="radio"/> LLC <input type="radio"/> PARTNERSHIP <input type="radio"/> SOLE OWNERSHIP <input type="radio"/>			
NAMES OF OWNER, PARTNERS, OR PRINCIPAL OFFICERS: <i>HyeKyong Lee</i>	TITLE: <i>owner</i>	NAMES OF OWNER, PARTNERS OR PRINCIPAL OFFICERS:	TITLE:

I declare that I am the owner, partner, corporate officer or person with the power of attorney, and I understand if any of the information provided above is not true the business license being applied for may be revoked as outlined in section 31.9.10 of the Torrance Municipal Code.  
 I am duly authorized to make this application. All of the information provided in this application is true and correct. The business will not provide any service, good or product which is illegal under Federal, State, or Local Laws. I declare under penalty of perjury that the foregoing is true and correct.

DATE: *1/7/2021*

**PART II. FOR OFFICIAL USE ONLY**

BASIC FEE:	PROCESSING FEE:	STATE FEE:	PER PERSON FEE:	PER UNIT FEE:
OTHER FEES:	PENALTY FEE:	TOTAL AMOUNT:	[REDACTED]	Business License # BL-LIC-

**NOTES:**  
 \* FOR A RESIDENTIAL BUSINESS ADDRESS YOU ARE NOT REQUIRED TO PROVIDE IT. IF YOU DO NOT WANT TO PROVIDE THE RESIDENTIAL ADDRESS PLEASE LEAVE BOX #1 BLANK AND SELECT YES UNDER BOX #3. FOR A RESIDENTIAL ADDRESS IN TORRANCE YOU WILL FIRST REQUIRE A HOME OCCUPATION PERMIT#.  
 \*\* ACCESS THE BUSINESS SIC CODE(S) AT UNITED STATES DEPARTMENT OF LABOR WEBSITE: [https://www.osha.gov/pls/ims/sic\\_manual.html](https://www.osha.gov/pls/ims/sic_manual.html)  
 \*\*\* ACCESS INFORMATION FOR AN INDUSTRIAL BUSINESS REQUIRING A WDID# FROM THE CALIFORNIA STATE WATER RESOURCES CONTROL BOARD WEBSITE: [https://www.waterboards.ca.gov/water\\_issues/programs/stormwater/for\\_industrial.html](https://www.waterboards.ca.gov/water_issues/programs/stormwater/for_industrial.html)

Attachment B

Telephone:  
618-5828

CITY OF TORRANCE  
REVENUE DIVISION

3031 Torrance Boulevard  
Torrance, CA 90503

APPLICATION FOR Massage Establishment

Torrance Municipal Code Section: \_\_\_\_\_

1/7/2021

NAME OF APPLICANT HyeKyoung Lee

PLEASE PRINT

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY Los Angeles, CA STATE \_\_\_\_\_

TYPE OF BUSINESS Massage Acupuncture

FIRM NAME Essencia Total Spa

ADDRESS 16612 Crenshaw Blvd PHONE 310) 719-8970

CITY Torrance STATE CA

PROOF OF AGE: BIRTH CERTIFICATE  BAPTISMAL CERTIFICATE  DRIVERS LICENSE  OTHER

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

FOR OFFICIAL USE ONLY  
NAME

FOR OFFICIAL USE ONLY

DATE	RECEIPT NO.	AMOUNT	ID CARD	LICENSE NO.	DATE ISSUED

NAMES AND ADDRESSES OF PERSONS, FIRMS OR CORPORATIONS BY WHOM APPLICANT HAS BEEN EMPLOYED FOR THE PAST FIVE YEARS:

Medical SPA Retreat, Inc

NAMES AND ADDRESSES OF THREE

KANG, ANDY (PESDO)

AE JA Lee

Sung JA Lee

LIST ANY AND ALL MISDEMEANOR AND FELONY CONVICTIONS FOR VIOLATIONS OF ANY LAW, EVEN IF THE CONVICTION WAS DISMISSED OR EXPUNGED, PER CALIFORNIA PENAL CODE 1203.4 ET.SEQ. Failure to list all convictions is grounds for DENIAL of the license. (IF ADDITIONAL SPACE IS NEEDED PLEASE ATTACH ADDITIONAL SHEETS)

A LETTER AUTHORIZING APPLICANT TO REPRESENT SAID PERSON, FIRM OR CORPORATION IS HEREWITH ATTACHED.

FOR OFFICIAL USE ONLY

APPROVED BY:

CHIEF OF POLICE

DATE

LICENSE P

DATE

DISAPPROVED BY:

CHIEF OF POLICE

DATE

LICENSE REVIEW BOARD

DATE

# CALIFORNIA MASSAGE THERAPY COUNCIL

*By authority of the State of California Code B&P Section 4600,  
the California Massage Therapy Council hereby awards to*

## Hyekyong Lee

*the designation of*

## CERTIFIED MASSAGE THERAPIST

*Let it be known by all that, having met the standards set forth by the California Massage Therapy Council and having demonstrated knowledge of applicable disciplines related to the practice of massage therapy, Hyekyong Lee is recognized as a CMT in good standing, including all the rights and privileges pertaining thereto, as witnessed by the signature below.*

*Given at Sacramento, California, Monday, January 27, 2020.*



A handwritten signature in black ink, appearing to read "Jeffrey Fournier". The signature is written in a cursive style and is positioned above a horizontal line.

*Jeffrey Fournier, Chairman of the Board  
California Massage Therapy Council  
CAMTC, One Capitol Mall, Suite 800, Sacramento, CA 95814*

**CERTIFICATE # 7606  
EXPIRES: 3/23/2022**

The validity and authenticity of this certificate may be verified online  
by entering the name and certificate number at: [www.camtc.org](http://www.camtc.org)

Attachment C

**Yuk Mei Devine**

*Real Estate Investment*

12/30/2020

City of Torrance

Business License Department

3031 Torrance Blvd.

Torrance, Ca. 90503

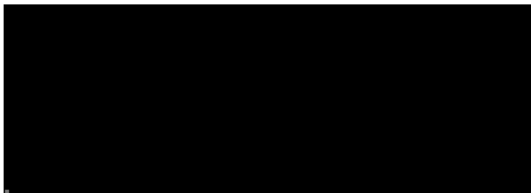
Re: 16612 Crenshaw Blvd. Torrance, Ca.

Dear Sir:

This is to inform you that I lease the above property to HyeKyong Lee to operate a massage and acupuncture Spa Service. The previous owner sold this business to HyeKyong Lee. I am the owner of this property, my address is [REDACTED] Torrance, Ca. 90501.

If you have any questions, please call me at [REDACTED]

Thank you.



2126 W. 230<sup>th</sup> Pl., Torrance, Ca. 90501  
(424) 263-5376

# California All-Purpose Certificate of Acknowledgment

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

S.S.

On 12/31/2020 before me, Vicor M Ameguin II, Notary Public  
Name of Notary Public

personally appeared Yuk Mei Denise  
Name of Signer (1)

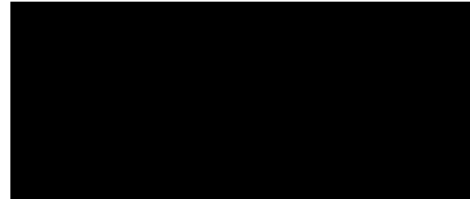
Name of Signer (2)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]  
Signature of Notary Public



Seal

## OPTIONAL INFORMATION

*Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.*

### Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of \_\_\_\_\_

containing \_\_\_\_\_ pages, and dated \_\_\_\_\_

The signer(s) capacity or authority is/are as:

- Individual(s)
- Attorney-in-fact
- Corporate Officer(s) \_\_\_\_\_  
Title(s)
- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: \_\_\_\_\_

representing: \_\_\_\_\_  
Name(s) of Person(s) Entitled to Sign (if Representing)

### Additional Information

#### Method of Signer Identification

Proved to me on the basis of satisfactory evidence:  
 form(s) of identification  credible witness(es)

Notarial event is detailed in notary journal on:

Page # \_\_\_\_\_ Entry # \_\_\_\_\_

Notary contact: \_\_\_\_\_

#### Other

- Additional Signer  Signer(s) Thumbprints(s)
- \_\_\_\_\_





Torrance Police Department Intelligence Detail  
License Review Interview Summary  
Detective Rich Gabel



To:  
**Suzanne Bittner**  
License Supervisor

Date: 04 February 2021

From:  
**Detective Rich Gabel**  
Intelligence Section

Subject:  
**"Essencia Total Spa"**  
16612 Crenshaw Blvd.  
Torrance, CA 90504  
(310) 719-8970

License Review Board Hearing – 18 February 2021

Licensees Interviewed:  
**Hyekyong Lee (Owner)**



On 04 February 2021, I interviewed Ms. Lee regarding her application for a business license for "Essencia Total Spa," 16612 Crenshaw Blvd., in the City of Torrance. Ms. Lee is opening an established business at this location and is the sole owner. This will be Ms. Lee's first business. The business will be providing body massage by appointments and "walk-in" type customers.

Ms. Lee is a certified massage therapist and her State California certification # is 7606 and it expires 03/23/2022. Ms. Lee related that she will also perform record keeping duties as well as being the receptionist and also massage services.

An inspection of that establishment (specific to the concerns of law enforcement) was met as required by TMC Section 35.14.80 and 35.14.090.

Ms. Lee was advised of the laws regulating this occupation, and she was provided with an "Applicable Code Highlights" form, which detailed these laws and regulations. I completed a Massage Establishment Licensing Interview Questionnaire with her which she signed indicating that she understood the laws regulating this occupation.

Ms. Lee was advised to strictly adhere to: record keeping, and hours of operation, as well as all the other rules and regulations that apply to the massage business.



**Detective Rich Gabel**  
Intelligence Section

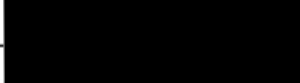


**Torance Police Department**  
**Acupuncture/Massage Establishment Licensing Interview**  
**Questionnaire**

Interpreter \_\_\_\_\_ Language \_\_\_\_\_



**General Information**

Business Name ESSENCE TOTAL SPA Phone 

Licensee(s) HYE KYONG LEE

Who are the sole owners? \_\_\_\_\_

Is the business incorporated? No

Are there other officers/owners in the company? \_\_\_\_\_

Business Address 16612 CARLISLE AVE

How Long Has This Business Been Operating? 10



**Company History**

**Past Businesses**

Have you been in the acupuncture/massage business before? YES

Location address? LA

How long? 25

Do you own any other businesses? NO

Location address? \_\_\_\_\_

**Record in Other Cities (If Applicable)**

In what other cities is the company licensed?

NO

Has the company had problems/issues in any of these cities? What problems/issues? How were the problems/issues resolved?

NO

Have you ever had your business license revoked or suspended? For what reason(s)?

NO

Have you responded to all open complaints (Better Business Bureau or Department of Consumer Affairs) in any other business you have owned? How were the complaints resolved?

N/A



**Business Inspection**

**The Following Conditions (Specific to the Concerns of Law Enforcement) Have Been Met As Required By TMC Section 35.14.080 and 35.14.090:**

- ✓ Minimum lighting shall be provided in accordance with the Uniform Building Code, and either natural light per CA Building Code (CBC) 1205.2 or artificial light per CBC 1205.3.
- ✓ A massage table will be used for all massage therapy with the exception of "Thai," "Shiatsu," and similar forms of therapy. Those may be provided on a padded mat on the floor provided the patron is fully attired in loose clothing or similar garment. Massage tables are required to be a minimum of 18 inches from the floor. **Beds, floor mattresses and waterbeds are not permitted on the premises of the business or establishment (35.14.080 (d)).**
- ✓ All exit doors will be kept unlocked during business hours.

✓ Closed cabinets shall be utilized for the storage of clean linen. All massage tables will be covered with a clean sheet or other clean covering for each patron. After use, each covering will be deposited in a closed receptacle and not used until properly sanitized in the immersion of water at least 140 degrees Fahrenheit for not less than 15 minutes. An adequate supply of clean linens will be maintained.

✓ The massage business must display the State Certificate (California Massage Therapy Council) of each massage therapist in a location so that it can be readily seen by persons entering the business.

✓ All massage rooms, toilet rooms, pools, showers, bathtubs, steam rooms saunas, Jacuzzis and all other physical facilities will be thoroughly cleaned and disinfected as needed and at least once each business day the premises is open and in use.

✓ The patron's genitals, pubic area, anus, and female patron's breasts below a point immediately above the top of the areola must be fully draped at all times while any employee of the business or establishment is in the massage therapy room with the patron. No massage therapy will be provided to a patron that results in intentional contact, or occasional and repetitive contact, with the genitals, anus, or areola of a patron.

✓ **An owner of a massage business shall be responsible for the conduct of all employees or independent contractors working on the premises of the business (Torrance Municipal Code (TMC) 35.14.120(a)).**

✓ **Each operator of a massage or acupressure establishment shall maintain a record of the date, time, name of customer, address of the customer, date of birth of the customer, type of service provided, and the licensed person supplying such service. The name, address and date of birth must be verified using legal identification prior to any service. Such records shall be open to inspection by health officials or police officers at all times, on the premises of the massage or acupressure establishment. Such records shall be kept for a minimum of not less than one year.** The information contained in such records shall be used only for the purpose of enforcing this Article, as well as other applicable laws, and shall otherwise be confidential. It shall be unlawful for any person to disclose such information for any unauthorized purpose.

✓ **35.14.050 T.M.C. Hours of Operation.**

No massage business or establishment will provide massage therapy to the public for compensation between the hours of 9:00 P.M. and 8:00 A.M. of the following day. The massage business or establishment must close and all patrons must leave the massage business or establishment by 9:00 P.M.



## **Local Codes and State Laws**

### **Acupuncture Standards of Practice (State Requirements)**

**An acupuncturist is allowed to engage in the practice of acupuncture, electro acupuncture, perform or prescribe the use of oriental massage, acupressure, moxibustion, cupping, breathing techniques, exercise, heat, cold, magnets, nutrition, diet, herbs, plant, animal, and mineral products, and dietary supplements to promote, maintain, and restore health pursuant to Business & Professions Code Section 4937.**

#### **1399.450. Condition of Office.**

1. (a) Every acupuncture office shall be maintained in a clean and sanitary condition at all times, and shall have a readily accessible bathroom facility in accordance with Title 24, Part 2, Building Standards Code Sections 494A.1 and 1994 Uniform Building Code Section 2902.3.

#### **1399.451. Treatment Procedures.**

In treating a patient, an acupuncturist shall adhere to the following procedures:

1. (a) The acupuncturist's hands shall be brush-scrubbed with soap and warm water immediately before examining patients or handling acupuncture needles and other instruments, and between patients.
2. (b) All instruments shall be sterilized before and between uses in a manner which will destroy all microorganisms. All needle trays which contain sterile needles shall also be sterile. Each time instruments are sterilized, the acupuncturist shall use a tape or strip indicator which shows that sterilization is complete.
3. (c) Acupuncture points, where needles are to be inserted, shall be cleaned with an appropriate antiseptic before insertion of the needle.
4. (d) In the event an acupuncture needle inserted in a patient breaks subcutaneously, the treating acupuncturist shall immediately consult a physician. An acupuncturist shall not sever or penetrate the tissues in order to excise such a needle.
5. (e) Any complication, including but not limited to, hematoma, peritonitis or pneumothorax arising out of acupuncture treatment shall be referred immediately to a physician or dentist or podiatrist, if appropriate, if immediate medical treatment is required..
6. (f) Acupuncture shall not be performed using hypodermic needles.
7. (g) All instruments to be discarded shall be disposed of safely.
8. (h) Needles shall be disposed of by placing them in a sealed, unbreakable container marked "Hazardous Waste" and disposed of in accordance with state and local law.

**1399.453. Record keeping.**

An acupuncturist shall keep complete and accurate records on each patient who is given acupuncture treatment, including but not limited to, treatments given and progress made as a result of the acupuncture treatments.

**1399.454. Single Use Needles.**

An acupuncturist shall use needles labeled for single use only that meet the requirements of federal regulations 21 CFR Part 880.5580 (61 FR 64617, December 6, 1996). It shall constitute unprofessional conduct for an acupuncturist to use a needle more than once.

**1399.455. Advertising.**

1. (a) A licensed acupuncturist may advertise the provision of any acupuncture services authorized to be provided by such licensure in a manner authorized by Section 651 of the code so long as such advertising does not promote the excessive or unnecessary use of such services.
2. (b) It is improper advertising as provided in Section 4955 of the code to disseminate any advertising which represents in any manner that the acupuncturist can cure any type of disease, condition or symptom.
3. (c) It is improper advertising as provided in Section 4955 of the code to disseminate any advertising of a practice, technique or procedure which is not within the scope of the practice of acupuncture as defined in Section 4927 and 4937 of the code and which is the unlawful practice of medicine.

**1399.456. Use of the Title "Doctor."**

It is unprofessional conduct for an acupuncturist to use the title "Doctor" or the abbreviation "Dr." in connection with the practice of acupuncture unless he or she possesses a license or certificate which authorizes such use or possesses an earned doctorate degree from an accredited, approved or authorized educational institution as set forth under Article 4 (commencing with section 94760) of Chapter 7 of Part 59 which is in acupuncture, Oriental medicine, a biological science, or is otherwise related to the authorized practice of an acupuncturist as set forth in Sections 4927 and 4937 of the Code.

The use of the title "Doctor" or the abbreviation "Dr." by an acupuncturist as authorized above without further indicating the type of license, certificate or degree which authorizes such use, constitutes unprofessional conduct.

**Is the Licensee(s) aware of applicable local codes and state laws?**

 \_\_\_\_\_

Has Licensee(s) received a copy of the "Massage Therapy Regulations?"

 \_\_\_\_\_

Does the Licensee(s) know how to contact the police department?

 \_\_\_\_\_



## Information Confirmation

I (We), as a licensee(s), fully understand all of the above information and will abide by all the rules and regulations that govern acupuncture/massage businesses. I confirm that all of the above listed information is correct.



*2/4/2021*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



LICENSE REVIEW BOARD MEETING  
FEBRUARY 18, 2021

ITEM NO. 5. B. – IRIX FOOT MASSAGE SPA

BACKGROUND

Yan Lun Liu owner of Irix Foot Massage Spa has made an application for approval of a business license to allow the operation of a massage establishment. The business is located at 2202 Artesia Boulevard, Suite D, in Torrance, California.

ANALYSIS

Per Section 31.7.3 subsection 25) of the Torrance Municipal Code, applications for a massage establishment must have License Review Board approval before issuance of the license.

RECOMMENDATION

All necessary documents have been received; therefore, the License Division recommends approval of the requested business license. The business will follow the City of Torrance, County of Los Angeles and State of California rules and regulations for the opening and operating a business during COVID-19.

Attachment A: Business License Application  
Attachment B: Form 100E and Massage Therapist's Certificate  
Attachment C: Statement from Property Owner  
Attachment D: Police Department Reports

Attachment A

Please call the Business License Office at 310 618 5923

Submitted with your application.



City of Torrance, Revenue Division  
Business License Application  
3031 Torrance Blvd, Torrance, CA 90503  
(P) 310-618-5923 (F) 310-618-5852  
revenue@torranceca.gov

SELECT APPLICABLE BOX:

NEW APPLICATION

CHANGE OF OWNERSHIP  
(greater than 50%)

CHANGE OF BUSINESS  
LOCATION

CHANGE OF NAME (Only)

**PART I. APPLICANT TO ANSWER ALL QUESTIONS IN THIS SECTION (print or type)**

BUSINESS NAME OR DBA: **IRLx Foot Massage SPA** CORPORATE NAME (LEGAL ENTITY NAME IF DIFFERENT FROM BUSINESS NAME OR DBA)

1. BUSINESS LOCATION (\*physical business address - see note below)  
2202 Artesia Blvd Suite# D City Torrance State CA ZIP 90504

2. MAILING ADDRESS OR PO/PMB BOX (required)  
2202 Artesia Blvd Suite# D City Torrance State CA ZIP 90504

3. IS THE BUSINESS LOCATED AT A RESIDENTIAL ADDRESS (\*select one)? YES  NO  HOME OCCUPATION PERMIT#: EMAIL ADDRESS:

NATURE OF BUSINESS (description of business activity in detail): **Foot & Body Massage**

FOR A BUSINESS LOCATED IN TORRANCE PROVIDE THE PRIMARY STANDARD INDUSTRY (SIC) CODE(S) (\*\*see note below): **7299 0201** STATE WASTE DISCHARGER IDENTIFICATION NUMBER (WQID#) (\*\*\*# applicable - see note below):

TECHNOLOGY BUSINESS (select one): YES  NO

Definition: A business entity utilizing scientific equipment and engineering techniques, microelectronics, data processing, genetic engineering, or telecommunications.

RETAIL BUSINESS - WILL YOU BE SELLING CBD PRODUCTS? (select one): YES  NO

Definition: CBD is the cannabidiol compound derived from industrial hemp, cannabis or other

CONTACT NAME: **Yan Jun Liu** CONTACT TITLE: **owner** BUSINESS PHONE#: **424-329-3090** CELL PHONE#: [REDACTED]  
# OF PEOPLE WORKING IN TORRANCE: **3** # OF UNITS (S): **1**  
STATE TAX ID# (SEIN): **120059** STATE CONTRACTORS LICENSE #: STATE SELLERS PERMIT#:

OWNERSHIP INFORMATION (check applicable box): CORPORATION  LLC  PARTNERSHIP  SOLE OWNERSHIP

NAMES OF OWNER, PARTNERS, OR PRINCIPAL OFFICERS: **Yan Jun Liu** TITLE: **owner**

I declare that I am the owner, partner, corporate officer or person with the power of attorney, and I understand if any of the information provided above is not true the business license being applied for may be revoked as outlined in section 31.9.10 of the Torrance Municipal Code.

DATE: **2-11-21**

BASIC FEE: PROCESSING FEE: STATE FEE: PER PERSON FEE: PER UNIT FEE:  
OTHER FEES: PENALTY FEE: TOTAL AMOUNT: Business License # BL-LIC-

NOTES:  
\* FOR A RESIDENTIAL BUSINESS ADDRESS YOU ARE NOT REQUIRED TO PROVIDE IT. IF YOU DO NOT WANT TO PROVIDE THE RESIDENTIAL ADDRESS PLEASE LEAVE BOX #1 BLANK AND SELECT YES UNDER BOX #3. FOR A RESIDENTIAL ADDRESS IN TORRANCE YOU WILL FIRST REQUIRE A HOME OCCUPATION PERMIT#.  
\*\* ACCESS THE BUSINESS SIC CODE(S) AT UNITED STATES DEPARTMENT OF LABOR WEBSITE: <https://www.osha.gov/oh-slc/sic-manual.html>  
\*\*\* ACCESS INFORMATION FOR AN INDUSTRIAL BUSINESS REQUIRING A WQID# FROM THE CALIFORNIA STATE WATER RESOURCES CONTROL BOARD WEBSITE: [https://www.waterboards.ca.gov/water\\_issues/programs/stormwater/industrial.html](https://www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.html)

Telephone: 618-5828

**CITY OF TORRANCE  
REVENUE DIVISION**

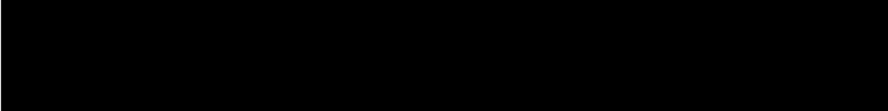
3031 Torrance Boulevard  
Torrance, CA 90503

APPLICATION FOR change of ownership

Torrance Municipal Code Section: \_\_\_\_\_

10/28/20

NAME OF APPLICANT Yanlun Liu



PHONE [redacted]  
STATE CA

FOR OFFICIAL USE ONLY  
NAME

TYPE OF BUSINESS Foot & body massage

FIRM NAME IRIX Foot Massage SPA

ADDRESS 2202 Artesia Blvd suite # D PHONE 424-329-3090

CITY TORRANCE STATE CA



FOR OFFICIAL USE ONLY

DATE	RECEIPT NO.	AMOUNT	ID CARD	LICENSE NO.	DATE ISSUED

NAMES AND ADDRESSES OF PERSONS, FIRMS OR CORPORATIONS BY WHOM APPLICANT HAS BEEN EMPLOYED FOR THE PAST FIVE YEARS:

Self employer

NAMES AND ADDRESSES OF THE

Ling wei

Sue Wang

baomin zhao

LIST ANY AND ALL MISDEMEANORS, FELONY OR Misdemeanor CONVICTIONS, OR FELONY OR MISDEMEANOR CONVICTIONS EXPUNGED, PER CALIFORNIA PENAL CODE 1203.4 ET. SEQ. Failure to list all convictions is grounds for DENIAL of the license. (IF ADDITIONAL SPACE IS NEEDED PLEASE ATTACH ADDITIONAL SHEETS)

None

A LETTER AUTHORIZING APPLICANT TO REPRESENT SAID PERSON, FIRM OR CORPORATION IS HEREWITH ATTACHED.

OFFICIAL USE ONLY

CHIEF OF POLICE

DATE

LIC

DISAPPROVED BY:

CHIEF OF POLICE

DATE

LIC

# CALIFORNIA MASSAGE THERAPY COUNCIL

By authority of the State of California Code BCLP Section 4600,  
the California Massage Therapy Council hereby awards to

## Yufang Zhang

the designation of

## CERTIFIED MASSAGE PRACTITIONER

Let it be known by all that, having met the standards set forth by the California Massage Therapy Council and having demonstrated knowledge of applicable disciplines related to the practice of massage therapy, Yufang Zhang is recognized as a CMP in good standing, including all the rights and privileges pertaining thereto, as witnessed by the signature below.

Given at Sacramento, California, Wednesday, October 07, 2020.



Jeffrey Foshan, Chairman of the Board  
California Massage Therapy Council  
CMTC, One Capitol Mall, Suite 800, Sacramento, CA 95814

CERTIFICATE # 40684  
EXPIRES: 12/21/2022

The validity and authenticity of this certificate may be verified online  
by entering the name and certificate number at: [www.camtc.org](http://www.camtc.org)

# CALIFORNIA MASSAGE THERAPY COUNCIL

*By authority of the State of California Code B&P Section 4600,  
the California Massage Therapy Council hereby awards to*

**Xue Zhou**

*the designation of*

## CERTIFIED MASSAGE PRACTITIONER

*Let it be known by all that, having met the standards set forth by the California Massage Therapy Council and having demonstrated knowledge of applicable disciplines related to the practice of massage therapy, Xue Zhou is recognized as a CMTCP in good standing, including all the rights and privileges pertaining thereto, as witnessed by the signature below.*

*Given at Sacramento, California, Monday, August 03, 2020.*



*Jeffrey Fochman, Chairman of the Board  
California Massage Therapy Council  
CMTCP, One Capitol Mall, Suite 800, Sacramento, CA 95814*

**CERTIFICATE # 71691  
EXPIRES: 9/16/2022**

The validity and authenticity of this certificate may be verified online  
entering the name and certificate number at: [www.camtc.org](http://www.camtc.org)

Attachment C

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November 10, 2020

City of Torrance, Revenue division  
Business License Application  
3021 Torrance Blvd, Torrance CA 90503

Dear Sir or Madam,

I, MASAAKI OYAMA, an employee of Marumatsu Inc., authorized by the landlord, acknowledge that IRIX foot massage spa will operate a massage business at the property 2202 Artesia Blvd .Suite D.Torrance CA90504, business owner name is Yan lun Liu.



---

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

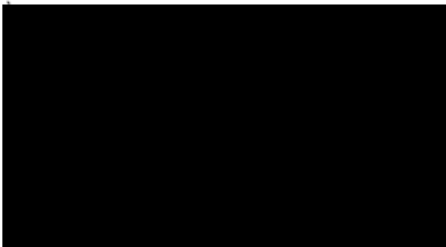
On 11/18/2020 before me, Jan Y. Georg Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared Masaaki Frank Oyama  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Handwritten Signature]  
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

Corporate Officer — Title(s): \_\_\_\_\_

Partner —  Limited  General

Individual  Attorney In Fact

Trustee  Guardian or Conservator

Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

Corporate Officer — Title(s): \_\_\_\_\_

Partner —  Limited  General

Individual  Attorney In Fact

Trustee  Guardian or Conservator

Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_





Torrance Police Department Intelligence Detail  
License Review Interview Summary  
Detective Rich Gabel



To:  
**Suzanne Bittner**  
License Supervisor

Date: 04 February 2021

From:  
**Detective Rich Gabel**  
Intelligence Section

Subject:  
**"IRIX Foot Massage Spa"**  
2202 Artesia Blvd. #D  
Torrance, CA 90504  
(424) 329-3090

License Review Board Hearing – 18 February 2021

Licensees Interviewed:  
**Yan Lin Liu (Owner)**



Interpreter:  
Yua Linaig

On 04 February 2021, I interviewed Mr. Liu (via Yu Linaig) regarding his application for a business license for "IRIX Foot Massage Spa," 2202 Artesia #D, in the City of Torrance. Mr. Liu is opening an established business at this location and is the sole owner. This will be Mr. Liu's first business. The business will be providing body massage by appointments and "walk-in" type customers.

Mr. Liu is not a certified massage therapist by the State California, but has completed DOJ fingerprints. Mr. Liu related that he will also perform record keeping duties as well as being the receptionist and also massage services.

An inspection of that establishment (specific to the concerns of law enforcement) was met as required by TMC Section 35.14.80 and 35.14.090.

Mr. Liu was advised of the laws regulating this occupation, and he was provided with an "Applicable Code Highlights" form, which detailed these laws and regulations. I

completed a Massage Establishment Licensing Interview Questionnaire with him which he signed indicating that he understood the laws regulating this occupation. Mr. Liu was advised to strictly adhere to: record keeping, and hours of operation, as well as all the other rules and regulations that apply to the massage business.



**Detective Rich Gabel**  
Intelligence Section



**Torrance Police Department**  
**Acupuncture/Massage Establishment Licensing Interview**  
**Questionnaire**

YU LINAI

Interpreter \_\_\_\_\_ Language \_\_\_\_\_



**General Information**

Business Name 181X FOOT MASSAGE SPA Pho 

Licensee(s) YAN LUN LIL

Who are the sole owners? \_\_\_\_\_

Is the business incorporated? NO

Are there other officers/owners in the company? \_\_\_\_\_

Business Address 7202 ANTRESIA BLVD ED

How Long Has This Business Been Operating? 1/24



**Company History**

**Past Businesses**

Have you been in the acupuncture/massage business before? YES NO

Location address? \_\_\_\_\_

How long? /

Do you own any other businesses? NO

Location address? \_\_\_\_\_

**Record in Other Cities (If Applicable)**

In what other cities is the company licensed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the company had problems/issues in any of these cities? What problems/issues? How were the problems/issues resolved?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had your business license revoked or suspended? For what reason(s)?

\_\_\_\_\_ *no*

Have you responded to all open complaints (Better Business Bureau or Department of Consumer Affairs) in any other business you have owned? How were the complaints resolved?

\_\_\_\_\_ *N/A*



**Business Inspection**

**The Following Conditions (Specific to the Concerns of Law Enforcement) Have Been Met As Required By TMC Section 35.14.080 and 35.14.090:**

- Minimum lighting shall be provided in accordance with the Uniform Building Code, and either natural light per CA Building Code (CBC) 1205.2 or artificial light per CBC 1205.3.
- A massage table will be used for all massage therapy with the exception of "Thai," "Shiatsu," and similar forms of therapy. Those may be provided on a padded mat on the floor provided the patron is fully attired in loose clothing or similar garment. Massage tables are required to be a minimum of 18 inches from the floor. **Beds, floor mattresses and waterbeds are not permitted on the premises of the business or establishment (35.14.080 (d)).**
- All exit doors will be kept unlocked during business hours.

✓  
Closed cabinets shall be utilized for the storage of clean linen. All massage tables will be covered with a clean sheet or other clean covering for each patron. After use, each covering will be deposited in a closed receptacle and not used until properly sanitized in the immersion of water at least 140 degrees Fahrenheit for not less than 15 minutes. An adequate supply of clean linens will be maintained.

✓  
The massage business must display the State Certificate (California Massage Therapy Council) of each massage therapist in a location so that it can be readily seen by persons entering the business.

✓  
All massage rooms, toilet rooms, pools, showers, bathtubs, steam rooms saunas, Jacuzzis and all other physical facilities will be thoroughly cleaned and disinfected as needed and at least once each business day the premises is open and in use.

✓  
The patron's genitals, pubic area, anus, and female patron's breasts below a point immediately above the top of the areola must be fully draped at all times while any employee of the business or establishment is in the massage therapy room with the patron. No massage therapy will be provided to a patron that results in intentional contact, or occasional and repetitive contact, with the genitals, anus, or areola of a patron.

✓  
**An owner of a massage business shall be responsible for the conduct of all employees or independent contractors working on the premises of the business (Torrance Municipal Code (TMC) 35.14.120(a)).**

✓  
**Each operator of a massage or acupressure establishment shall maintain a record of the date, time, name of customer, address of the customer, date of birth of the customer, type of service provided, and the licensed person supplying such service. The name, address and date of birth must be verified using legal identification prior to any service. Such records shall be open to inspection by health officials or police officers at all times, on the premises of the massage or acupressure establishment. Such records shall be kept for a minimum of not less than one year.** The information contained in such records shall be used only for the purpose of enforcing this Article, as well as other applicable laws, and shall otherwise be confidential. It shall be unlawful for any person to disclose such information for any unauthorized purpose.

✓  
**35.14.050 T.M.C. Hours of Operation.**

No massage business or establishment will provide massage therapy to the public for compensation between the hours of 9:00 P.M. and 8:00 A.M. of the following day. The massage business or establishment must close and all patrons must leave the massage business or establishment by 9:00 P.M.



## Local Codes and State Laws

### Acupuncture Standards of Practice (State Requirements)

**An acupuncturist is allowed to engage in the practice of acupuncture, electro acupuncture, perform or prescribe the use of oriental massage, acupressure, moxibustion, cupping, breathing techniques, exercise, heat, cold, magnets, nutrition, diet, herbs, plant, animal, and mineral products, and dietary supplements to promote, maintain, and restore health pursuant to Business & Professions Code Section 4937.**

#### **1399.450. Condition of Office.**

1. (a) Every acupuncture office shall be maintained in a clean and sanitary condition at all times, and shall have a readily accessible bathroom facility in accordance with Title 24, Part 2, Building Standards Code Sections 494A.1 and 1994 Uniform Building Code Section 2902.3.

#### **1399.451. Treatment Procedures.**

In treating a patient, an acupuncturist shall adhere to the following procedures:

1. (a) The acupuncturist's hands shall be brush-scrubbed with soap and warm water immediately before examining patients or handling acupuncture needles and other instruments, and between patients.
2. (b) All instruments shall be sterilized before and between uses in a manner which will destroy all microorganisms. All needle trays which contain sterile needles shall also be sterile. Each time instruments are sterilized, the acupuncturist shall use a tape or strip indicator which shows that sterilization is complete.
3. (c) Acupuncture points, where needles are to be inserted, shall be cleaned with an appropriate antiseptic before insertion of the needle.
4. (d) In the event an acupuncture needle inserted in a patient breaks subcutaneously, the treating acupuncturist shall immediately consult a physician. An acupuncturist shall not sever or penetrate the tissues in order to excise such a needle.
5. (e) Any complication, including but not limited to, hematoma, peritonitis or pneumothorax arising out of acupuncture treatment shall be referred immediately to a physician or dentist or podiatrist, if appropriate, if immediate medical treatment is required..
6. (f) Acupuncture shall not be performed using hypodermic needles.
7. (g) All instruments to be discarded shall be disposed of safely.
8. (h) Needles shall be disposed of by placing them in a sealed, unbreakable container marked "Hazardous Waste" and disposed of in accordance with state and local law.

**1399.453. Record keeping.**

An acupuncturist shall keep complete and accurate records on each patient who is given acupuncture treatment, including but not limited to, treatments given and progress made as a result of the acupuncture treatments.

**1399.454. Single Use Needles.**

An acupuncturist shall use needles labeled for single use only that meet the requirements of federal regulations 21 CFR Part 880.5580 (61 FR 64617, December 6, 1996). It shall constitute unprofessional conduct for an acupuncturist to use a needle more than once.

**1399.455. Advertising.**

1. (a) A licensed acupuncturist may advertise the provision of any acupuncture services authorized to be provided by such licensure in a manner authorized by Section 651 of the code so long as such advertising does not promote the excessive or unnecessary use of such services.
2. (b) It is improper advertising as provided in Section 4955 of the code to disseminate any advertising which represents in any manner that the acupuncturist can cure any type of disease, condition or symptom.
3. (c) It is improper advertising as provided in Section 4955 of the code to disseminate any advertising of a practice, technique or procedure which is not within the scope of the practice of acupuncture as defined in Section 4927 and 4937 of the code and which is the unlawful practice of medicine.

**1399.456. Use of the Title "Doctor."**

It is unprofessional conduct for an acupuncturist to use the title "Doctor" or the abbreviation "Dr." in connection with the practice of acupuncture unless he or she possesses a license or certificate which authorizes such use or possesses an earned doctorate degree from an accredited, approved or authorized educational institution as set forth under Article 4 (commencing with section 94760) of Chapter 7 of Part 59 which is in acupuncture, Oriental medicine, a biological science, or is otherwise related to the authorized practice of an acupuncturist as set forth in Sections 4927 and 4937 of the Code.

The use of the title "Doctor" or the abbreviation "Dr." by an acupuncturist as authorized above without further indicating the type of license, certificate or degree which authorizes such use, constitutes unprofessional conduct.

**Is the Licensee(s) aware of applicable local codes and state laws?**

Y L L

Has Licensee(s) received a copy of the "Massage Therapy Regulations?"

Y L L

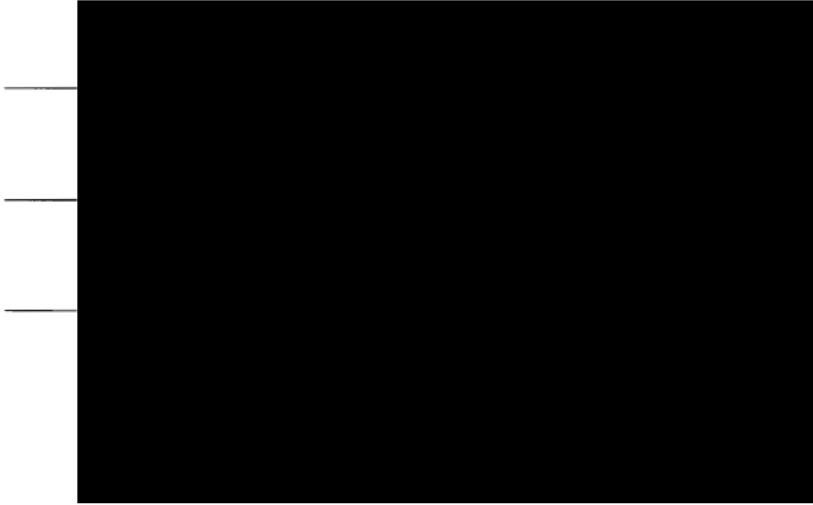
Does the Licensee(s) know how to contact the police department?

Y L L



## Information Confirmation

I (We), as a licensee(s), fully understand all of the above information and will abide by all the rules and regulations that govern acupuncture/massage businesses. I confirm that all of the above listed information is correct.



02/04/2021  
Date

\_\_\_\_\_  
Date