

Board of Health  
Meeting Minutes  
July 14, 1987

Present: Ellen Foberg, George Riggan, Marion Boggs,  
Melissa Quinn

The meeting was called to order at 8:07 P.M.

The Chairman reported that a notice of herbicide spraying to be done along their right-of-way had been received from B&M Railroad. The information will be made available to the public through the Goal Post.

Mrs. Foberg reported that she had received a telephone call from Alexis Ed-Rogers from Wales regarding the Maltby property on Brown Road. Ms. Ed-Rogers was seeking information on conditions that must be met before erecting a log home, (which she said has already been purchased), on the Maltby land. Mrs. Foberg informed her that they would need a percolation test prior to obtaining a building permit, and told her that percolation tests were only performed during the months of March, April and May. Mrs. Ed-Rogers has contracted to have the home erected and was planning to move within the month. It was the concensus of the Board that due to mitigating circumstances, they would waive the percolation regulation and allow a test to be performed, providing other requirements are fulfilled, i.e., road frontage, deed, minimum lot size, property line and any other applicable requirements. \*(SEE BELOW)\*

There was a motion to adopt the attached policies regarding the licensure of massage therapists in the Town of Rowe. (Application for license is also attached.) The motion was seconded and carried unanimously.

The meeting adjourned at 8:45 P.M.

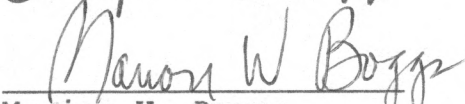
Respectfully submitted,  
Melissa Quinn, Clerk

Approved:

\*This motion was recinded in  
meeting of July 21\*

  
Ellen L. Foberg

  
George A. Riggan

  
Marion W. Boggs

# Town of Rowe

FRANKLIN COUNTY

Massachusetts

0 1 3 6 7

From the Office of  
BOARD OF HEALTH

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## RULES & REGULATIONS GOVERNING MASSAGE & GIVING OF VAPOR BATHS

Rule 1. No person(s) shall practice massage, or conduct an establishment for the giving of vapor baths for hire or reward, or advertise or hold himself (herself) out as being engaged in the business of massage or the giving of said baths without first receiving a license therefor from the Board of Health.

Rule 2. Each applicant for a license to practice massage or to conduct an establishment for the giving of vapor baths, shall be over 21 years of age, a citizen of the United States and of good moral character.

Rule 3. Each applicant shall file with the Board of Health an application form approved by the Board and three (3) letters of recommendation.

Rule 4. Each applicant shall present to the Board of Health satisfactory evidence of their training and experience.

Rule 5. Licensees shall not employ diathermy equipment, short wave, electrical equipment, the x-ray, the ultra ray or any mechanical device except with a written, signed order from a licensed physician. These orders are to be kept on a permanent file.

Rule 6. Premises used as an establishment for the practice of massage or the business of giving vapor baths shall be approved by the Board of Health or its agent and shall be open to inspection by the Board of Health at all times in accordance with Chapter 140, Section 51 of the Massachusetts General Laws.

Rule 7. Licenses to practice massage or to give vapor baths shall expire on the first day of May following the date of issue.

Rule 8. The Board of Health may suspend or revoke any licenses to practice massage or to give vapor baths, granted by it, for any such cause as it deems sufficient and without a hearing.

Rule 9. No license for Massage and Vapor Baths shall be granted until a certificate of health signed by a physician has been filed with the Board of Health, annually signifying that, that person has been examined and found to be free of contagious disease, the examination shall include a TB test.

TOWN OF ROWE  
BOARD OF HEALTH:

Approved:

\_\_\_\_\_  
Ellen L. Foberg

\_\_\_\_\_  
George A. Riggan

\_\_\_\_\_  
Marion W. Boggs

I agree to comply with the above stated rules and regulations governing Massage and the Giving of Vapor Baths.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Street

\_\_\_\_\_  
Town

\_\_\_\_\_  
Zip

# Town of Rowe

FRANKLIN COUNTY

Massachusetts

0 1 3 6 7

From the Office of

APPLICATION FOR MASSAGE LICENSE

BOARD OF HEALTH

SECTION 51, CHAPTER 140

(Chapter 275 of the Acts of 1932, and as further amended by  
Chapter 428 of the Acts of 1935, Rules and Regulations  
thereof)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Place of  
Business: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employment Past Three Years:

First Employer  
Employers Name: \_\_\_\_\_ Type of Work: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Second Employer  
Employers Name: \_\_\_\_\_ Type of Work: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
(Use Back Of Page If More Room Is Needed)

Over 21 Years of Age      Birth Certificate      Photo Attached

\_\_\_\_\_

Education: All Schools Above Elementary

(Other Side)

Name of School	Address	From: (year) to (year)	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Training and Experience: \_\_\_\_\_  
\_\_\_\_\_

Work In Previous Massage Establishments: \_\_\_\_\_  
\_\_\_\_\_