

APPLICANT INFORMATION

Date: 12/16/2022

Name: Nicholas Wasierski

Address: 2000 N. HWY 12

City: Boulder State: UT Zip: 84716

Phone: 907 231 9807 Fax:

Cell Phone: 907 231 9807

Email: ~~nikolas.wasierski~~ Nwasierski@gmail.com

Contact Person: Nicholas Wasierski

CONDITIONAL USE and SITE PLAN APPLICATION

Fee Amount: \$

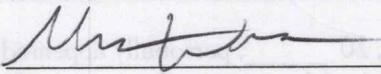
Proposed Conditional Use: wellness, Bodywork (SE ROOM OF house Designated to office space)

Location/Address of Proposed Application: 2000 N. HWY 12 Boulder UT 84716

Current Zoning District: GMU

Total Acreage (square feet or acres) of Site: 1367 OF the House, 156 sq feet in Room

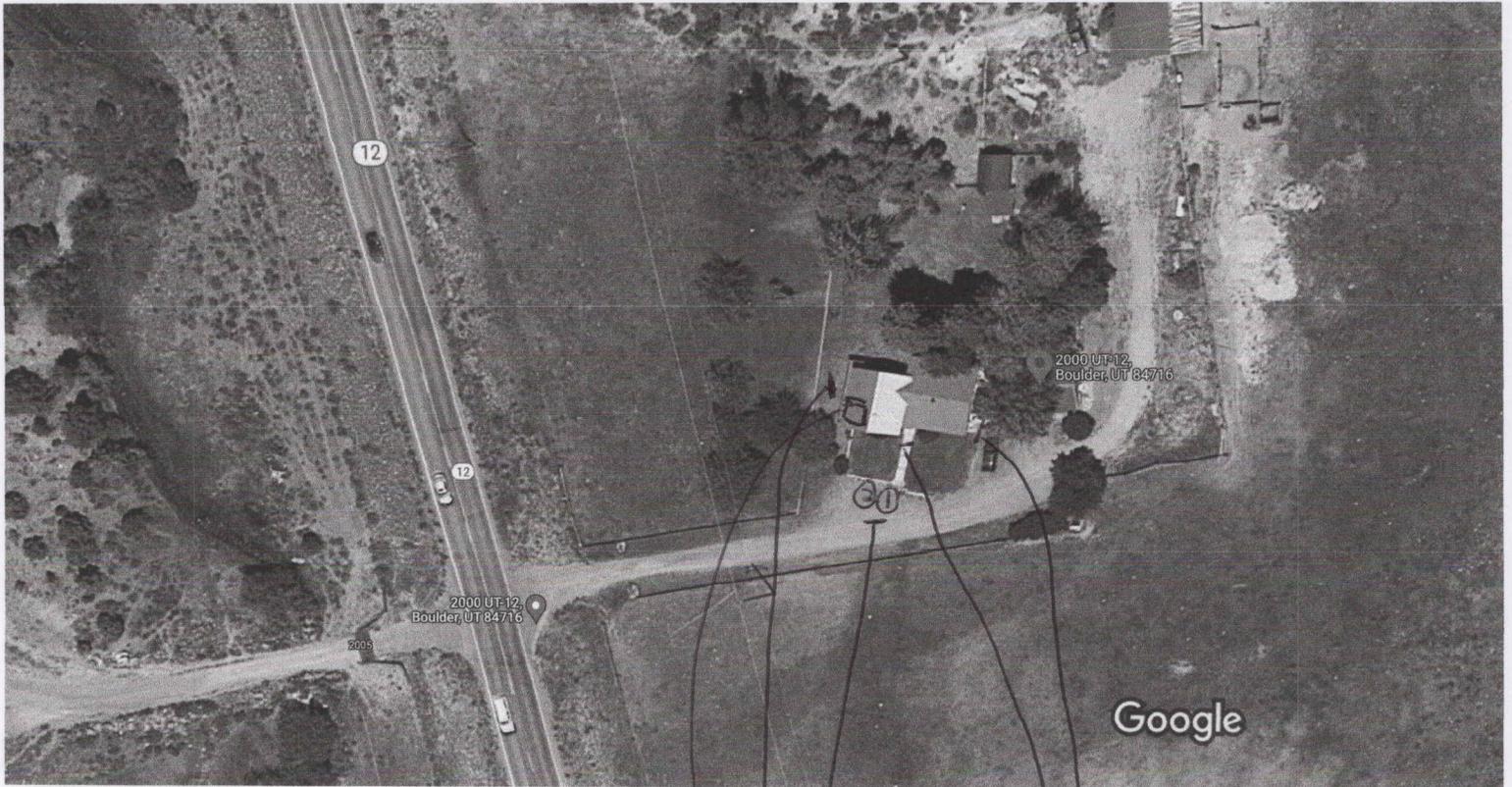
Name of Property Owners: Ray Gardner

Signature of Applicant(s): 

Boulder Town Office Use Only

Date Received:	Date Determined Complete:	Fees Paid:
12-22-2022	12-22-2022	

Google Maps 2000 UT-12



Imagery ©2022 Google, Imagery ©2022 CNES / Airbus, Maxar Technologies, Map data ©2022 Google 50 ft

4 Parking
2 spots

3 exits/entrance
→ South is the main
East/West are
Secondary

1 SW Room is the
main Designated
Office Space

Boulder Town
PO Box 1329
Boulder, Utah 84716

Phone: (435) 335-7300

Fax: (435) 335-7530

Application for

BUSINESS LICENSE

Name of Applicant: Nicholas Wasierski

Name of Business: Wandering Bear Wellness

Location of Business: 2000 N. UT St. Hwy 12 Boulder UT.
84716

Class of License: () Class I (X) Class II

Description of Business: Wellness, Bodywork, message

Class II Licenses only: If your business requires a license, permit or other authorization issued by the State of Utah or the United States government, attach a copy of your current documents.

Signed: Nick Wasierski Date: 12/16/2022

INSTRUCTIONS:

1. Complete this application.
2. Return the completed application with the license fee to the Town Clerk.

Boulder Town

Additional Information for Business License

Page 2

Name of Applicant: Nicholas Wasierski

Name of Business: Wandering Bear Wellness

1. Has the building(s) in which your business is located received a final inspection from all issued building permits?

- Yes
 Building was completed and under its current use prior to December 3, 1992.
 No, there are outstanding building permits for projects in progress.

Projected completion date: _____

Other: _____

2. If your business is open to the public, does your business have an approved public water supply?

- Yes, water supplied by Boulder Farmstead Water Company
 Yes, water supplied by an approved well designated as a public water supply
 No, business is not open to the general public

Other _____

3. If your business is open to the public, does your business have an approved septic system?

- Yes, business has an approved septic system
 No, business was in operation under its current use prior to the state's requirement for an approved septic system
 No, business is not open to the public

Other: _____

Additional Information for Business License

4. Has your business been inspected by the Boulder Town Fire Marshal within the past twelve

months?

- Yes, there were no noted violations
- Yes, there were noted violations which have been corrected
- Yes, there were noted violations which have not been corrected

Projected date of compliance: _____

No

5. Does your business require a license, permit or other authorization issued by the State of Utah? (DOPL, Sales Tax, etc.)

Yes (Attach a copy of your current documents.)

No

6. Does your business require a license, permit or other authorization issued by the United States Government?

Yes (Attach a copy of your current documents.)

No

7. Does your business require periodic inspections by a State of Utah agency?

Yes (List the agencies and attach a copy of the latest report by each agency.)

Agency: _____

Agency: _____

No

8. Does your business require periodic inspections by a United States agency?

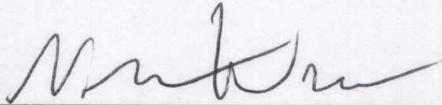
Yes (List the agencies and attach a copy of the latest report by each agency.)

Agency: _____

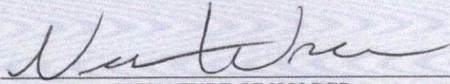
Agency: _____

No

The above information is true and correct.

Signed: 

Date: 12/16/2022

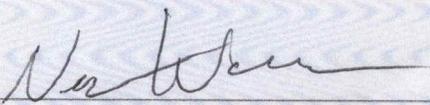
STATE OF UTAH DEPARTMENT OF COMMERCE ACTIVE LICENSE Nicholas Taylor Wasierski EFFECTIVE 12/16/2022	EXPIRATION 05/31/2025	REFERENCE NUMBER(S), CLASSIFICATION(S) & DETAIL(S) 13164008-4701 Massage Therapist  SIGNATURE OF HOLDER
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IMPORTANT LICENSURE REMINDERS:

- Your license is valid until the expiration date listed on this form. Approximately 60 days prior to this expiration you will receive an email with renewal information.
- Please note the address listed below is your public address of record for the Division. All future correspondence from the Division will be mailed to this address or emailed to the email on record. If you move or change your email, it is your responsibility to keep DOPL informed. Maintaining a current address AND email with DOPL is the easiest way to ensure continuous licensure.

NICHOLAS TAYLOR WASIERSKI
 2000 N HWY 12
 PO BOX 1450
 BOULDER UT 84716

Please visit our web site at www.dopl.utah.gov should you have any questions in the future.

STATE OF UTAH DEPARTMENT OF COMMERCE DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSING ACTIVE LICENSE		
EFFECTIVE DATE:	12/16/2022	
EXPIRATION DATE:	05/31/2025	
ISSUED TO:	Nicholas Taylor Wasierski	
REFERENCE NUMBER(S), CLASSIFICATION(S) & DETAIL(S)		
13164008-4701	Massage Therapist	
		 SIGNATURE OF HOLDER



Certificate of Insurance

AMTA Member ID#: 1967513
 Nicholas Wasierski
 2000 N Utah State Hwy 12
 Boulder, UT 84716

AMTA Member Classification: PROF

Enrolled Member Effective Date: 12/01/2022 - 11/30/2023

Coverage for enrolled member's business is limited to claims arising from enrolled member's professional services.

Administered By:
 Healthcare Providers Service Organization
 Affinity Insurance Services, Inc.
 1100 Virginia Drive, Suite 250
 Fort Washington, PA 19034

Insurance Company:
 Columbia Casualty Company
 A CNA Company

TYPE OF INSURANCE	MASTER POLICY NUMBER	LIMITS (per enrolled member)
Professional Liability Occurrence Coverage	0289955556	\$2,000,000 each claim / \$6,000,000 aggregate Subject to the Master Policy Aggregate

Coverage is afforded to AMTA Members for a period of 12 months concurrent with the Enrolled Member Effective Date or until membership is terminated or expires. Student Enrolled membership expires on the last day of the month in which the Student Enrolled Member graduates. No coverage is afforded to Student Enrolled Members for providing massage therapy services outside of school sanctioned and directed activities. If the AMTA Master Policy is non-renewed or cancelled, the AMTA Member's coverage under this policy will terminate upon the expiration of the Enrolled Member Effective Date and will not be renewed. The Master Policy Aggregate may be reduced by claims paid on behalf of other insureds.

ADDITIONAL COVERAGES (included in Professional Liability Limits specified above)

- | | |
|---|---|
| <ul style="list-style-type: none"> • General Liability • Products Liability • Host Liquor Liability • Personal Injury Liability | <ul style="list-style-type: none"> • Good Samaritan Liability • Malplacement Liability • Fire & Water Legal Liability (subject to \$100,000 sub limit) |
|---|---|

COVERAGE EXTENSIONS	COVERAGE EXTENSION LIMITS
<ul style="list-style-type: none"> • License Protection • Defendant Expense Benefit • Deposition Representation • Assault (excluding Texas) • Medical Payments • First Aid • Information Privacy Coverage (HIPAA) 	<ul style="list-style-type: none"> \$10,000 per proceeding / \$25,000 aggregate \$10,000 aggregate \$2,500 per deposition / \$5,000 aggregate \$10,000 per incident / \$25,000 aggregate \$2,000 per person / \$100,000 aggregate \$2,500 aggregate \$25,000 aggregate

This material is intended to provide a general overview of the products and services offered. Coverage for enrolled member's business is limited to claims arising from enrolled member's professional services. Only the policy can provide the actual terms, coverage amounts, conditions and exclusions.

Please contact HPSO at 1-888-253-1474 directly for a free copy of the complete policy.

