California Massage Therapy Council

Certificate Holder

1. CAMTC Certificate Number : 94619

2. Name :

First Name : Weihong

Last Name : Hu

Middle Name :

3. Home Address :

Street : 8652 Sunridge Ave

City : Forestville State : CALIFORNIA Zip : 95436

4. Is your Mailing Address the same as the above Home Address where you live?

Yes No

If you answered "No" to the question above, then you must provide your current Mailing Address below. You are also required by law to provide your primary email address, if you have one. Please remember that your Application may be denied, delayed, or you may be required to pay additional processing fees if you provide CAMTC with an incorrect Mailing Address.

Mailing Address :

Street : 8652 Sunridge Ave

City : Forestville State : CALIFORNIA Zip : 95436

Primary Phone : (626) 210-7839 Mobile

Secondary Phone : Mobile

Website : N/A

Primary Email : hudiamond550@gmail.com

Secondary Email : daaiwujiangdiamond@qq.com

Work Information

5. Please provide the following WORK INFORMATION for ALL locations where you CURRENTLY provide Massage Therapy Services and for all massage businesses you CURRENTLY own or operate.

Business Name	Start Date	End Date	Business Phone	City	State	Zip	Action
Highway 12 Massage	05/27/2024		(707) 907-0819	Santa Rosa	CA	95436	

6. Please provide all of your Previous Massage Work Locations within the past ten (10) years. Please include ALL locations where you have provided Massage Therapy services and every massage business you have owned or operated in the past ten (10) years.

Business Name	Start Date	End Date	Business Phone	City	State	Zip	Action

APPLICANT HISTORY SECTION

A "Yes" answer to any of the following questions requires a separate written statement explaining in your own words all of the complete details (as requested in the instructions) regarding the incident or event. All supporting documentation for a "Yes" answer must be attached to your recertification application at the time it is filed with the California Massage Therapy Council ("CAMTC"). CAMTC reserves the right to request additional documentation as needed.

Failure to fully disclose or provide all requested information is a violation of the law and is considered to be an attempt to procure a certificate by fraud, misrepresentation, or mistake, and is grounds for denial of an application or revocation of a CAMTC certificate.

1. Since the date you signed and dated your initial application for certification to CAMTC, have you received an administrative or civil citation related to the practice of massage therapy, or a massage therapy business, or any other profession, or been denied or refused the renewal of a license, permit, certificate, or other authorization to practice massage therapy, or related to a massage therapy business or any other profession, in any city, county, state, country, or jurisdiction? ○ Yes ◉ No

2. Since the date you signed and dated your initial application for certification to CAMTC, have you had a license, certificate, certificate of registration, permit, or other authorization for a massage therapy business, or to practice massage therapy, or for any other profession, revoked, suspended, or otherwise acted against (including administrative citation, civil citation, municipal code violation, probation, fine, reprimand, settlement, or surrender of a license, permit, certificate, or other authorization)? ○ Yes ◉ No

3. Since the date you signed and dated your initial application for certification to CAMTC, have you had, or is there currently pending against you, in any city, county, state, country, or jurisdiction, a complaint against your professional conduct (sexual misconduct or otherwise) or professional competence? ○ Yes ◉ No

4. Are you aware of any complaints made against you to a business, or made to you directly, in relation to your conduct as a massage professional, or in relation to a massage therapy business you currently or in the past have owned or operated? ○ Yes ◉ No

5. Since the date you signed and dated your initial application for certification to CAMTC, have you had criminal charges filed against you for penal code section 647(b) - Prostitution or any act punishable as a sexually related crime? ○ Yes ◉ No

6. Have you ever been convicted of any criminal offense? (You need not disclose any marijuana related offenses specified in the marijuana reform legislation and codified in the Health and Safety Code sections 11361.5 and 11361.7.) If "Yes", please explain fully as described in the instructions. ALL convictions MUST be reported even if they have been adjudicated, dismissed, or expunged. The definition of a "conviction" includes a plea of nolo contendere (no contest), as well as pleas or verdicts of guilty. You MUST include ALL convictions, including infractions, misdemeanor, and felony convictions. ○ Yes ◉ No

7. Are you now, or have you ever been, required to register as a Sex Offender in California or another state? ○ Yes ◉ No

APPLICANT AFFIDAVIT RECORD RELEASE

You have a right to obtain a copy of your criminal history record, if any. You have right to challenge the accuracy and completeness of your criminal history and your right to obtain a determination as to the validity of your record before CAMTC makes a final determination concerning your eligibility for certification.

I, **(Weihong Hu)** hereby declare and reaffirm that, except for the new information contained herein or attached hereto, the information contained in my initial CAMTC application is still true and correct and I did not omit any relevant information in my initial CAMTC application or this application. ☑ Yes

I understand that it is my duty and responsibility as a CAMTC Certificate Holder and applicant for recertification to supplement and/or update my information with CAMTC when any change in circumstances or conditions occur which might affect CAMTC's decision concerning my eligibility for certification or recertification. I understand that if I am charged with Penal Code section 647(b) - Prostitution or any act punishable as a sexually related crime, or required to register as a sex offender in California or another state, I am required to immediately notify CAMTC of the fact that these charges have been filed against me and if/when I have been convicted of these or any other offenses. Failure to supplement and/or update my information may result in disciplinary action by CAMTC including but not limited to denial, suspension, or revocation of my Certificate. ☑ Yes

I understand that it is my responsibility by law to provide CAMTC with any change of home address, change of business address(es), change of primary email address, and addition of business address(es) within 30 days of any such change or additions, and that failure to report such changes or additions in a timely manner to CAMTC may result in disciplinary action by CAMTC including but not limited to denial, suspension, or revocation of my certificate. ☑ Yes

I understand and agree that my application for recertification may be denied based on unprofessional conduct if I practice massage at a massage establishment, or own a massage establishment, that advertises in any adult and/or sexually oriented section of any form of media, whether print or digital. ☑ Yes

I hereby authorize Law Enforcement Agencies (LEA), government agencies, and other massage related entities to release my records to CAMTC upon request and I hereby authorize CAMTC to share all information about me, whether provided by me or others, including personal information, with LEA, government agencies, and other massage related entities upon request. (Note: we will not sell or release personal information for marketing purposes). ☑ Yes

I understand that if I am granted CAMTC certification, it is only for a period of two years, and it is my responsibility to submit a fully completed application for re-certification and ensure that it is received by CAMTC before the expiration date listed on my certificate. I further understand that a reminder notification may be sent to me as a courtesy, but failure to receive the reminder notification does not waive my responsibility to submit a fully completed application for re-certification and ensure that it is received before my current certificate expires. I further understand that failure to submit a fully completed application for re-certification that is received by CAMTC before my certificate expires will result in a late fee if the application for re-certification is received by CAMTC within six (6) months of my certificate expiring. I further understand that if a fully completed application for re-certification is not received by CAMTC within six (6) months of my certificate expiring, I will be required to apply for certification as a **new applicant** and I will have to meet all of the requirements for certification that exist at the time I apply. **I UNDERSTAND THAT UNDER NO CIRCUMSTANCES CAN THIS LATE FEE OR POLICY BE WAIVED.** ☑ Yes

I HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH THE STATUTES AND RULES APPLICABLE TO THE PRACTICE OF MY PROFESSION IN CALIFORNIA. ☑ Yes

I understand that my recertification application fee is non-refundable regardless of the ultimate disposition of my application for recertification. ☑ Yes

I HAVE CAREFULLY READ THE FOREGOING QUESTIONS AND HAVE ANSWERED THEM COMPLETELY WITHOUT RESERVATION OF ANY KIND, AND I DECLARE UNDER PENALTY OF PERJURY, THAT MY ANSWERS AND ALL OF THE STATEMENTS MADE HEREIN AND PROVIDED IN SUPPORT OF THIS APPLICATION ARE COMPLETE, TRUE AND CORRECT. Should I furnish any false information or fail to submit any relevant information in support of this application for recertification, I understand that such action shall constitute cause for denial, suspension, or revocation of my CAMTC Certificate. ☑ Yes

Signature : Weihong Hu

Date : 08/04/2025

Payment

Recertification Fee (includes ONE original CAMTC certificate) : $300.00

(By law you must display an original CAMTC certificate at each business location where you provide massage for compensation.)

I understand that my Application Fee is non-refundable regardless of the ultimate disposition of my application.

Payment Method :	Check
Recertification Fees :	$ 300
Total number of additional original certificates requested :	x $30.00 each
Fee for all Additional Original Certificates requested :	$ 0
Late Fee :	$ 0
Total fee (incl. recert. App. and add. original certs) :	$ 300
Check # :	Invoice 14731
Reference Number :	Processed by CAMTC
InvoiceDate :	08/26/2025

Paid

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