



GENERAL AND
HOME-BASED
BUSINESS LICENSE
APPLICATION

1001 E. 9TH ST. BLDG A
PO BOX 11130
RENO, NEVADA 89520
(775) 328-3733
www.washoecounty.us

WASHOE COUNTY BUSINESS LICENSE REQUIREMENTS

Washoe County Business License needs to have the following items completed and returned with the fee.

1. **BUSINESS LICENSE APPLICATION.** Please complete this form in its entirety.
2. **SITE PLAN.** Any general, non home-based business located in the unincorporated areas of Washoe County needs to provide a site plan showing the size and location of existing signs and structures on the location to be used.
3. **NEVADA STATE TAXATION.** If you are selling anything, you will need to provide a letter of clearance, stamp, email, or bill from the Nevada Department of Taxation. The Nevada Department of Taxation is located at 4600 Kietzke Ln., Building "L" #235, Reno, Nevada. Their phone number is (775) 688-1295 and their website is <http://tax.state.nv.us/>.
4. **STATE BUSINESS LICENSE.** All applicants need to register with the Nevada Secretary of State's for the state business license. Their applications are online at www.nvsos.gov or you may pick one up in our office. You may register with them online, by mail or in person at their office located at 202 North Carson Street in Carson City. Their phone number is (775) 684-5708.
5. **STATE INDUSTRIAL INSURANCE.** The applicant needs to complete a Nevada Industrial Insurance affirmation of compliance letter, even if you have no employees. If you have employees and have questions, you will need to speak to the Nevada Industrial Insurance at 400 W. King St. #400, Carson City, Nevada or at (775) 684-7270.
6. **CORPORATION STATUS.** If your business is a corporation, you must register your corporation with the Nevada Secretary of State's Office and provide a copy of the articles of incorporation or corporate seal with your application to Washoe County. For corporation information call (775) 684-5708 or visit the Secretary of State's offices at 202 North Carson Street in Carson City.
7. **FICTITIOUS NAME.** If your business is utilizing a fictitious firm name (DBA), it must be registered with the Washoe County Clerk's Office for businesses located in Washoe County. You need to provide a copy of your fictitious name with your application. The Washoe County Clerk's Office is at 75 Court St., Reno, Nevada or at (775) 328-3270.
8. **PERSONAL HISTORY FORM.** Each owner of the business applying for a Washoe County business license needs to complete a personal history form and submit it with the application. This requirement does not apply to corporations. All questions must be answered when completing this form.
9. **CHILD SUPPORT STATEMENT.** Each owner of the business needs to complete the child support statement required by NRS 244.33506. Corporations and limited liability companies need to complete the child support exemption statement.
10. **STORMWATER DISCHARGE PERMITS.** Certain types of commercial and industrial businesses are required to obtain a stormwater permit from the Nevada Division of Environmental Protection (NDEP). All applicants are encouraged to contact NDEP at (775) 687-9417 to determine if the proposed business activity requires a stormwater permit.
11. **APPROVALS AND AGENCY SIGN-OFFS.** Business License will provide you with information regarding certain federal, state, county, and city requirements. However, this service is informational and should not be construed as a final or complete interpretation of legal requirements, which must be obtained from the appropriate agency. The applicant will be directed to all applicable agencies for final approval. These agencies may charge fees for any inspections to be made.
12. **FEES.** The first year fee for a new business is \$75.00. Checks are made payable to Washoe County.



1001 E. 9th St. Bldg A
PO Box 11130
Reno, NV 89520
(775) 328-3733
www.washoecounty.us



431 Prater Way
PO Box 857
Sparks, NV 89432
775-353-2360
www.cityofsparks.us



1 East 1st St. 2nd Floor
PO Box 1900
Reno, NV 89505
775-334-2090
www.cityofreno.com

Note to license applicant: Licensure by one jurisdiction does not guarantee a license with another jurisdiction. Please submit a separate and complete application to each jurisdiction within which you seek to conduct business.

BUSINESS LICENSE APPLICATION

Number of Personnel

Please Type Or Print In Black Or Blue Ink Only

Full Time _____

Part Time _____

01) Corporate Name/Business Name:

02) Doing Business In Nevada As (DBA):

03) Start Date:

04) Business Location (No PO Boxes):

Suite #:

05) Federal Tax Id No. (EIN):

06) City:

07) State:

08) Zip Code:

09) Bus. Phone:

10) Mailing Address:

11) Bus. Fax:

12) City:

13) State:

14) Zip Code:

15) E-mail:

16) Business Entity Type: Sole Proprietor Corporation Partnership LLC Association

17) Contractor's License #:

18) Describe The Nature Of Business To Be Conducted (Be Specific And Complete):

19) Location Of Rentals:

20) Number of Rental Units:

21) First Years Estimated Gross Receipts (Reno Only):

Please List Individual Licensee

22) Licensee:

23) Title:

24) Phone:

25) Home Address:

26) Alternate Phone:

27) City:

28) State:

29) Zip Code:

30) Date of Birth:

List Individuals With Interest Or Ownership In The Business

31) Full Name

Title

Address

DOB

Emergency Contact/Local Contact Information

32) Name:

33) Phone:

34) If this applying individual, or any member of this applying firm, has been convicted in this state, or elsewhere, within the past ten years of any offense, not including minor traffic offenses, please state the offense or offenses and the punishments assessed therefore.

I, THE UNDERSIGNED, UNDERSTAND THAT: (1) IT IS UNLAWFUL FOR ANY PERSON TO TRANSACT OR CONDUCT ANY BUSINESS WITHOUT FIRST HAVING OBTAINED A BUSINESS LICENSE; (2) THIS DOCUMENT IS AN APPLICATION ONLY AND CERTAIN CONDITIONS MUST BE MET BEFORE A BUSINESS LICENSE WILL BE ISSUED TO ME; (3) I CERTIFY THE INFORMATION SUBMITTED ON AND WITH THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

35) Signature of Licensee:

36) Title:

37) Date:

Official Use Only

Commercial Home Based
Not In City Admin Office
Shared Space/
Booth Rental Non-Profit

Total Amt. Paid _____

Date Paid _____

Receipt # _____

Sewer Acct # _____

Parcel # _____

License No. _____

Activity Type _____

Effective Date _____

Expiration Date _____

Health Recommendation

Other Recommendation

Planning Recommendation

STATE OF NEVADA, DIVISION OF INDUSTRIAL RELATIONS
AFFIRMATION OF COMPLIANCE
WITH MANDATORY INDUSTRIAL INSURANCE REQUIREMENTS
(Instructions with Definitions are located on reverse side)

Business Name (Include any name doing business as)	Type of Business	Business Telephone Number	
Business Address	City	State	Zip Code
Federal Identification No.	Social Security No.	Contractor's Board License No.	
Name of Principal Owner (Please Print)		Principal Owner's Telephone No.	
Principal Owner's Address	City	State	Zip Code

Identified as: (Complete one section only)

- That the above identified business has obtained industrial workers' compensation insurance as required by Chapter 616A to D, inclusive, of the Nevada Revised Statutes (NRS):

Effective Date of Coverage

Account Number

- That the above identified business is not subject to the provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes, due to a statutory exemption or as a business which has no employees nor hires any independent contractor or subcontractor.
- That the above identified business has a valid certificate of self-insurance pursuant to Chapter 616A to D, inclusive, of Nevada Revised Statutes.

Effective Date

Certificate Number

I declare that I have the authority to act on behalf of the above described business, and am applying for a license to operate said business as a (n): Individual Sole Proprietor Partnership Corporation

Name of Applicant (Please Print)	Applicant's Telephone Number		
Applicant's Residence Address	City	State	Zip Code

I do hereby affirm that the above information is true and correct.

DATED this _____ day of _____, 20_____.

Signature of Applicant (To be signed in the presence of the business license office employee)	Applicant's Title
--	--------------------------

Witness Signature - (Business License Office Employee)	Name of City or County
---	-------------------------------

If unable to sign this document in the presence of a Business License Employee, the Applicant's signature must be notarized.

SUBSCRIBED and SWORN to before me on this _____ day of _____, 20_____.

NOTARY PUBLIC

INSTRUCTIONS

The provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes require every person, firm, voluntary association, and private corporation, including any public service corporation, which has any person, subcontractor, or independent contractor, under contract of hire, to obtain industrial insurance coverage in Nevada or obtain a certificate of self-insurance from the Nevada Commissioner of Insurance. **Subcontractors and independent contractors engaged in the same trade, business, profession or occupation as the hiring person or business, are by law considered to be employees.** One exception to the requirement for industrial insurance is if you or your business hires no employees, subcontractors or independent contractors. You are not required to obtain industrial insurance coverage for the following employees: theatrical or stage performers; casual musicians; household domestics, farm, dairy, agricultural or horticultural laborers, or persons engaged in stock or poultry raising; voluntary ski patrolmen; real estate brokers and/or salesmen; direct sellers; or clergy. Businesses, which elect to obtain industrial insurance coverage for such persons, gain valuable rights and significantly reduce liabilities for injuries to these persons. **A business which hires persons who are exempt from the provisions of Chapter 616A to 617, inclusive, of the Nevada Revised Statutes may be held liable in tort for injuries to those persons.** A business, which hires exempt persons, may elect to obtain industrial insurance, including sole proprietor coverage and partnerships.

IMPORTANT NOTICE: Pursuant to the provisions of NRS 616D.200(1): Any employer within the provisions of NRS 616B.633 who fails to provide, secure or maintain compensation as required by the terms of this chapter, is: (a) for the first offense, guilty of a **misdemeanor** and (b) for a second or subsequent offense committed within 7 years after the previous offense, guilty of a **category D felony**.

Definitions for Purposes of this Affirmation:

“Applicant” is the person executing this document

“Business Name” is the name under which the business will operate, including the identification of any other names under which the entity will do business.

“Corporation” is a business which is incorporated in the state of Nevada or in any other state, and which is recognized as an active corporation by the Secretary of State for the State of Nevada.

“Type of Business” means the nature of the business...

“Individual” is a person who operates a business which hires no employees, subcontractors, or independent contractors.

“Partnership” is a business, which is owned and operated by two or more individuals who share ownership rights to the net profits of the business and who share in all the liabilities of that business. A limited partnership is included in the term partnership if the limited partners are investors only, and do not perform services for the business.

“Principal Owner” is the owner, sole operator, designated general partner, or resident agent for the corporation.

“Sole Proprietor” is a self-employed owner of an unincorporated business and includes working partners and members of working associations, which may or may not hire employees.

**WASHOE COUNTY BUSINESS LICENSE
CHILD SUPPORT COMPLIANCE
STATEMENT/EXEMPTION FORM**

The Welfare Reform Act, as implemented by the 1997 session of the Nevada Legislature by SB 356, requires that professional and occupational licensing agencies add certain questions regarding child support to all applications for new licenses and renewals. Pursuant to this legislation, all owners of this business are required to complete a Child Support Compliance Statement or Exemption Form depending on the business structure. Failure to complete and return this form will be cause to deny your business license application. Each owner of a non-exempt business is required to complete his/her own form.

STATEMENT

- _____ 1. I am not subject to a court order for the support of a child.
- _____ 2. I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for repayment of the amount owed pursuant to the order.
- _____ 3. I am subject to a court order for the support of one or more children and am NOT in compliance with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Business Name: _____

Business Address: _____

Owner Name: _____

-Or-

EXEMPTION

- _____ 1. Multiple shareholder corporations
- _____ 2. Limited Liability Company
- _____ 3. Partnership registered with the State of Nevada

Business Name: _____

Business Address: _____

Authorized Signature

Date