THE FOLLOWING ITEMS MUST BE COMPLETED AND ACCOMPANY YOUR CARSON CITY LICENSE APPLICATION

BUSINESS LICENSE:

- D-25 Form (Industrial Insurance Compliance)
- Copy of State Business Registration
  Office of the Secretary of State
  202 N. Carson St., Carson City, NV 89701
  (775) 684-5708 www.nvsos.gov
- Carson City Sheriff's Responsible Party Information – Carson City Commercial Location Only
- Carson City Provisions Regulating Home Occupations - Carson City Home Based Only
- Copy of State of Nevada Specialty License - If applicable
- Business Information Form
- Fictitious Firm Name (DBA) Form - **$20.00 Fee** (If applicable)
- **Application/Update Fee - $25.00**
- The approval process takes approximately 7 -10 business days assuming all the information necessary for processing is provided to our office by the applicant at time of submittal.

GAMING LICENSE:

- **Application Fee - $25.00**
- Copy of State Gaming License

LIQUOR LICENSE:

- Applicant's Authority to Release Information
- Rules and Regulations Affidavit
- Sheriff's Applicant Questionnaire
- Authorization to Release Criminal History Record
- Sheriff's Work Card Application
- Personal History Record
- Invested Capital Questionnaire
- Proof of Citizenship – Original Birth Certificate or Passport
- Copy of Driver's License
- Liquor License and Health Permit Interim Management Agreement – (If Applicable)
- Copy of State License – Breweries and Wholesalers
- **Beer/Wine License Application Fee - $500.00 or**
- **Hard Liquor License Application Fee - $1000.00**
- **Investigation Fee - $500.00**
- An appointment is required to submit Liquor License application and begin background investigation.
- The approval process takes approximately 45 days assuming all the information necessary for processing is provided to our office by the applicant at time of submittal.

SUBMIT APPLICATION TO THE FOLLOWING ADDRESS:
Carson City Business License Division
108 E. Proctor St
Carson City, NV 89701
(775) 887-2105

HOURS OF OPERATION:
8:00 - 4:00 Monday – Friday
12:00 – 1:00 Closed

WEBSITE: www.carson.org

Fees required for a **NEW Business License** are as follows: (Renewal fees billed annually)

Type of Business	Annual Fee
Home Based	$63.85
Out of Town	$79.90
Hobby (Home Based – Income under $3500/year)	$26.60
Short-Term (60 days or less)	$22.70/day or $113.50/month
Independent Contractor - (Tattoo and Permanent Make-up – Additional one time fee $25.00)	$42.60
Contractor – Home Based or Out of Town	$78.75
Commercial Location – Base Fee (Plus Additional fees from table below)	$63.85

Additional Fees for Commercial Locations –

Square Footage -	0 – 1,999	-	$ 13.00
	2,000 – 2,999	-	$ 32.25
	3,000 – 4,999	-	$ 64.70
	5,000 – 7,499	-	$ 96.90
	7,500 – 9,999	-	$129.45
	10,000 – 24,999	-	$194.65
	25,000 plus	-	$259.20

Employees -	1-100	- $6.15 each
	101 plus	- $2.85 each

Business Licenses are prorated according to the month business is started:

January	100%	**May**	67%	**September**	33%
February	92%	**June**	58%	**October**	25%
March	83%	**July**	50%	**November**	17%
April	75%	**August**	42%	**December**	8%

Fees required for a **NEW Liquor License** are as follows: (Renewal fees billed annually)

Type of Liquor License	Annual Fee
Dining Room with Beer and Wine Only	$600.00
Dining Room with Hard Liquor	$800.00
Tavern/Bar	$800.00
General Wholesale Liquor	$800.00
Packaged Liquor	$800.00
Combo – Packaged Liquor and On-Premise	$900.00

Additional Liquor License Fees – If Applicable	
Additional Wet Bar	$500.00 each
Catering	$400.00

Liquor Licenses are prorated according to the month business is started:

July	100%	**November**	67%	**March**	33%
August	92%	**December**	58%	**April**	25%
September	83%	**January**	50%	**May**	17%
October	75%	**February**	42%	**June**	8%

Fees required for a **NEW Gaming License** are as follows: (Renewal fees billed quarterly)

Type of Game	Quarterly Fee	Type of Game	Quarterly Fee
Slot Machines	$40.00/machine	Keno/Baccarat/Race Book/Sports Book	$172.50/table
Craps/Roulette/Twenty-One	$180.00/table	Poker	$97.50/table

CARSON CITY LICENSE APPLICATION

Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature

Business License #:

Submittal Date:

1	☐ New Business	☐ Change of Location/Mailing	☐ Change of Name	☐ Change of Corporate Officer	☐ Other
2	Type of License(s)	☐ Business	☐ Short-Term	☐ Gaming	☐ Liquor
3	Type of Entity	☐ Sole Proprietor	☐ Corporation	☐ Partnership	☐ Limited Liability Company	☐ Non-Profit

4	Entity Name		5	Business Opening Date
6	Business Name (DBA)		7	EIN #
8	Business Address	City	State	Zip Code
9	Mailing Address	City	State	Zip Code
10	Corporate Phone	Business Phone	Cellular Phone	Business Fax
11	E-mail Address	Business Website		

12 Owner(s), Manager(s), or other Principal(s) attach additional pages if required

Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Liquor Manager (if applicable)	☐ On-Site ☐ Off-Site	Contact Phone Number
Residence Address (Street)	City, State, Zip	

13 Describe in detail the activity of your business

14 Type of Liquor License Applying for (If applicable)

☐ Tavern/Bar	☐ Dining Room w/Beer and Wine Only	☐ Packaged Liquor	☐ Dining Room w/Hard Liquor	☐ Combo (On-Premise & Pkg)	☐ General Wholesale
☐ Catering	☐ Additional Wet Bars _____		Will there be an Interim Management Agreement?		

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List number of slot machines (If applicable)		List number of table games (If applicable)	
☐ 1 cent _____	☐ Multi _____	☐ Craps _____	☐ Baccarat _____
☐ 5 cent _____	☐ Poker _____	☐ Roulette _____	☐ Race Book _____
☐ 25 cent _____	☐ Mega Buck _____	☐ Twenty-One _____	☐ Sports Book _____
☐ 1.00 _____		☐ Keno _____	☐ Poker _____

17 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below:

Miscellaneous Information

Please answer this section if your business is *located* in Carson City. If you are unsure of your answer or are installing signage, contact the Planning Division at (775) 887-2180

Is your business location zoned for this type of business	**Has a Special Use Permit been obtained for this business location**
Will you be installing any outdoor signs	**Are there any existing signs of the property**

Will there be any outside storage (If yes, please explain items being stored and how being screened)

Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)

Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business

Rules and Regulations

I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approval by all necessary city departments

- **If any changes are made after completing said license application this office must be notified immediately and an updated is required.**
- **A business license, liquor license, and/or gaming license are issued to a given owner at a SPECIFIC LOCATION and are NON-TRANSFERRABLE to a different owner or different location**
- **Non-payment of annual and quarterly business license, liquor license, and/or gaming license fees by the due date will result in applied penalties and is grounds for the revocation of the license.**
- **Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation**

I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that failure to complete this form truthfully is an act of perjury.

Applicant's Signature _____ **Date** _____

FEE STRUCTURE	FEE		LICENSE TOTAL FEES
Business License Fee			**Business License Annual Fee:**
Square Footage			**Business License Pro-rated Fee:**
Number of Employees			**Business License Application/Update Fee:**
Health Fee			**Liquor License Annual Fee:**
Number of Rental Units			**Liquor License Pro-rated Fee:**
Number of Coin Operated Machines			**Liquor License Application Fee:**
Number of Slot Machines			**Liquor License Investigation Fee:**
TOTAL FEES DUE:			**Gaming License Quarterly Fee:**
Payment Type			**Gaming License Application Fee:**
Received By	**Date**		**Fictitious Name Fee:**
Date Applicant Fingerprinted	**By**	**File #**	**Health Pre-Inspection Fee:**

Certificate of Business: Fictitious Firm Name

Please Print or Type

The undersigned do hereby certify that _____
(Name of individual, corporation, partnership, or trust)

located at_____ is conducting business in Carson City,
(Street Address of Business or Residence)

Nevada, under the fictitious name of _____
(Fictitious Firm Name)

and that said firm is composed of the following person(s) whose name(s) and address(es) are as follows:
By signing below I do solemnly swear (or affirm), under penalty of perjury, that all statements made in this document are true.

1. _____ _____
Full Name and Title Signature Date
_____
Street Address City, State, Zip
_____
Mailing Address, if different from above City, State, Zip

2. _____ _____
Full Name and Title Signature Date
_____
Street Address City, State, Zip
_____
Mailing Address, if different from above City, State, Zip

3. _____ _____
Full Name and Title Signature Date
_____
Street Address City, State, Zip
_____
Mailing Address, if different from above City, State, Zip

4. _____ _____
Full Name and Title Signature Date
_____
Street Address City, State, Zip
_____
Mailing Address, if different from above City, State, Zip

State of _____
County of _____

On this _____ day of _____, 20 ___, before me personally appeared: _____
_____
known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged to me that he(she)(they) has (have) executed the same freely and voluntarily and for the uses and purposes therein stated. In Witness whereof, I have hereunto set my hand and affixed my official seal this _____ day of _____ 20___.

_____
Notary Public/Deputy County Clerk
Carson City, Nevada

RECEIVED AND FILED

_____
Date

_____
Deputy County Clerk

Return to Carson City Business License, 108 E. Proctor St., Carson City, NV 89701 with $20 filing fee

CARSON CITY PROVISIONS REGULATING HOME OCCUPATION
(FOR ADDRESSES LOCATED IN RESIDENTIAL ZONES)

The Home Occupation Provision is included in recognition of the needs of many people who are engaged in small business ventures which could not be sustained if it were necessary to lease commercial quarters for them, or which in the nature of the home occupation could not be expanded to full scale enterprise. It is the intent of the ordinance that full scale commercial or professional operations which would ordinarily be conducted in a commercial or industrial district continue to be conducted in such districts and not in residential districts.

In granting a business license, it is necessary to verify that the subject property will be used in conformance with the City's Zoning Ordinance. Please read the following information and complete the form as indicated. If you have any questions or require further information, call **(775) 887-2180** or stop by the Planning and Community Development Department at **108 E. Proctor St.**

Once this statement is signed, it will be come a part of your business license record with the City.

18.03.010 Home Occupation means a use customarily carried on by a dwelling occupant and incidental to the primary residential use, providing such residential character of the property is not changed and is operated in compliance with 18.05 (Home Occupation).

18.05.045 Home Occupation: Uses which shall not be permitted as home occupations include barber and beauty shops, food processing or packaging, real estate and law offices, restaurants, cabinet shops, adult entertainment businesses, kennels (except for certified training of three or fewer service animals), vehicle repair or similar uses.

ALL HOME OCCUPATIONS SHALL BE SUBJECT TO AND MUST COMPLY WITH SECTION 18.03.010 AND ALL THE FOLLOWING PROVISIONS OF THIS SECTION:

1. **Business license requirements.** All home occupations must obtain a Carson City business license and meet the requirements of this Section.

2. **Sale of merchandise.** Sale of goods, samples, materials, equipment or other objects on the premises is not permitted. Home occupations shall not conduct business in person with clients at the home address, with the exception of federally licensed gun dealers, required by federal regulations to conduct firearm sales at their home location.

3. **Size limits.** No more than 20% of the total ground floor area of the dwelling and accessory structure may be used for home occupation.

4. **Employees.** No on-site office staff or business personnel shall be permitted in any home occupation unless the employees are members of the resident family and reside on the premises.

5. **Character.** The characteristics of the structure shall not be altered, nor shall the occupation within the dwellings be conducted in a manner which would cause the premises to differ from its residential character either by the use of colors, materials, construction, lighting or by signs, or the emission of sounds, noises, dust, odors, fumes, smoke, electrical disturbance or vibrations, or disturbs the peace and general welfare of the area.

6. **Traffic.** Pedestrian and vehicular traffic shall be limited to that normally associated with residential districts. Deliveries from commercial suppliers may not be made more than once each week and the deliveries shall not restrict traffic circulation.

7. **Storage.** There shall be no outdoor storage of materials or equipment; no storage of toxic or hazardous materials, including ammunition and gunpowder; nor shall merchandise be visible from outside the dwelling.

8. **Location.** The home occupation shall be confined within the main building and/or accessory structure as a secondary use of the residential use. When conducted in a garage, the home occupation shall not permanently eliminate the use of the garage as a parking space for a car, nor shall the bay door be open while the home occupation is conducted within the garage.

9. **Use of facilities and utilities.** The use of utilities and community facilities shall be limited to that normally associated with the use of the property for residential purposes.

10. **Advertising.** There must not be any public advertising which calls attention to the fact that the dwelling is being used for business purposes. Telephone listings, business cards, or any other advertising of the business, shall not include the dwelling address. The name, telephone, and purpose of the home occupation may be advertised on not more than one vehicle which is operated by the resident or residents of the dwelling in conjunction with the business. The home address may appear on letterhead and invoices when the home address is also the business address.

11. **Electromagnetic interference.** Electrical or mechanical equipment which creates video or audio interference in customary residential electrical appliances or causes fluctuations in line voltage outside the dwelling unit is prohibited.

12. **Fire safety.** Activities conducted and equipment or material used or stored shall not adversely change the fire safety of the premises.

13. **Parking.** No parking or placement of commercial vehicles such as trucks, trailers, equipment or materials except one panel van or pickup truck, when used for personal transportation.

I _____will be conducting business as _____
at my home address located at _____, I have read the above information and if granted a home occupation business license, I agree to comply with these regulations as set forth above.

Signature of Applicant _____Date _____

CARSON CITY SHERIFF'S OFFICE
RESPONSIBLE PARTY INFORMATION

Kenneth Furlong
Sheriff

DATE

BUSINESS NAME	
BUSINESS ADDRESS	
BUSINESS PHONE	
BUSINESS MANAGER	
AFTER HOURS CONTACTS	
NAME:	PHONE:
NAME:	PHONE:
NAME:	PHONE:
NAME:	PHONE:
NAME:	PHONE:
ALARM COMPANY	
NAME:	PHONE:
ADDRESS:	PHONE:

Manager's Signature

Date

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 No.**	
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 patrolman; 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.

AType of Business@ means the nature of 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.

FOR ASSESSOR OFFICE USE ONLY

ACCOUNT NUMBER: _____

TAX DISTRICT: _____

BUSINESS TYPE: _____

BUSINESS INFORMATION FORM

(Please Print)

□ New Business □ Change of Location/Mailing □ Name Change □ Purchase Business

BUSINESS NAME (DBA): _____**BUSINESS PHONE:** _____

DATE OPENED OR ANTICIPATED OPENING: _____

LOCATION ADDRESS: _____

TYPE OF BUSINESS: _____

TYPE OF ENTITY: □ Sole Proprietor □ Corporation □ Partnership □ Limited Liability Comp. □ Non-profit

MAILING ADDRESS: _____

OWNER OR CONTRACT PERSON: _____ **Title:** _____

EMAIL ADDRESS: _____**PHONE (if different than above):**_____

WAS THIS A CHANGE TO AN EXISTING BUSINESS? YES _____ NO _____
(If yes, please indicate previous name of business _____)

PREVIOUS LOCATION, IF APPLICABLE _____

ARE THERE ADDITIONAL LOCATION FOR THIS BUSINESS? YES _____ NO _____
(If yes, please list additional locations and attach to form)

DID YOU PURCHASE THE BUSINESS? YES _____ NO_____
(If yes, did the purchase include the equipment? YES _____ NO _____)

****

**** In July of each year, the Carson City Assessor's Office will be sending you a Statement of Business Equipment and Assets Form that will be due on July 31st. If you have any questions regarding the assessment, please contact our office at:**

201 N. Carson St. Ste. 6
Carson City, NV 89701
775-887-2130

SIGNATURE: _____ **DATE:** _____

-N O T I C E-

To all Carson City Business Owners

Business equipment and assets are subject to Nevada personal property tax.

The Carson City Assessor's Office will send you an annual Statement of Personal Property every July 1, for equipment owned as of July 1 of the current year. Per Nevada Revised Statute 361.265, use the statement to report the date and cost of all equipment and assets used to operate/conduct your business.

Your original costs also include:

- Transportation costs
- Installation/set up cost necessary to make the equipment operational

Your Statement of Personal Property should include, but is not limited to the following:

- Assets fully depreciated out for IRS purposes but still in your possession
- Computers, laptops, printers, software/hardware upgrades, mainframe, plotters, scanners
- Fax, copiers, postage machines, security equipment, etc
- Calculators, safes, cash registers, credit card machines, etc
- Telephones/telephone system, music system, public address system, etc
- Furnishings & fixtures: furniture, computer furniture, display racks, showcases
- Signs: indoor, outdoor, free standing, wall mounted, etc
- Leasehold equipment: modifications made to the building to accommodate your business
- Machinery or equipment specific to your type of business
- Items given to you or purchased used(estimate market value as of date you acquired)
- Equipment/assets, regardless of age, not previously reported
- Equipment that is leased, loaned, stored, or held in our possession

Do not include:

- Inventory held for resale
- Vehicles licensed through the Department of Motor Vehicles
- Consumables: pens, paper, cash register tape, cleaning supplies, etc

The Assessor's Office is located at 201 N. Carson St #6. Please call or stop by for an informational booklet.

Questions-contact Caron at (775) 887-2130 or email cmachado@carson.org