



LIQUOR AND GAMING LICENSE APPLICATION

1001 E. 9TH STREET, BUILDING A

P.O. BOX 11130

RENO, NEVADA 89520

(775) 328-3733

www.washoecounty.us

INSTRUCTIONS AND REQUIREMENTS FOR WASHOE COUNTY LIQUOR AND GAMING LICENSE

All applicants must provide Business License with the following:

1. **LIQUOR/GAMING LICENSE APPLICATION.** When completing this form it is important to list all persons who are directly or indirectly involved in the business. Failure to list these individuals could result in denial of the application.
2. **PREMISES.** All applicants will be required to submit a copy of the lease (one year minimum), bill of sale or escrow instructions on the premises.
3. **NEVADA STATE TAXATION.** All applicants will need to provide a letter of clearance, stamp, email, or bill from the Nevada Department of Taxation with this application. The Nevada Department of Taxation is located at 4600 Kietzke Ln., Building "L" #235, Reno, Nevada. Their phone number is (775) 687-9999 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. **PARTNERSHIP AGREEMENT OR ARTICLES OF INCORPORATION.** If your business is formed under a partnership you are required to submit an executed copy of the partnership agreement. If under 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.
7. **FICTITIOUS FIRM 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, officer and director of the business applying for a Washoe County business license must complete a personal history form. All questions must be answered when completing this form and all convictions must be listed.
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. **INVESTIGATION.** Each owner, officer and director will be required to have a criminal history background check by going to the Washoe County Sheriff's Office to be fingerprinted. The Sheriff's Office will charge a fee for this investigation.
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.** All license fees will be remitted at the time the application is made. No investigation will be initiated until these fees are remitted. Checks are made payable to Washoe County.

NOTE: Certain employees of liquor and/or gaming establishments must possess valid work permits and/or alcohol education cards. Contact the Sheriff's Office at (775) 328-3032 for information on work permits and the Nevada Department of Taxation at (775) 687-9999 for information on alcohol education cards.



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



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



1001 E. 9th St. Bldg A
 PO Box 11130
 Reno, NV 89520
 (775) 328-3733
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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					
01) Corporate Name/Business Name:				Full Time _____	
02) Doing Business In Nevada As (DBA):				Part Time _____	
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: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Association				17) Contractor's License #:	
18) Describe The Nature Of Business To Be Conducted (Be Specific And Complete):					
<hr/> <hr/> <hr/>					
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
<hr/> <hr/>					
Emergency Contact/Local Contact Information				Official Use Only	
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.					
<p>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.</p>					
35) Signature of Licensee:		36) Title:		37) Date:	
Health Recommendation		Other Recommendation		Planning Recommendation	
				Commercial <input type="checkbox"/> Home Based <input type="checkbox"/> Not In City <input type="checkbox"/> Admin Office <input type="checkbox"/> Shared Space/ Booth Rental <input type="checkbox"/> Non-Profit <input type="checkbox"/> Total Amt. Paid _____ Date Paid _____ Receipt # _____ Sewer Acct # _____ Parcel # _____ License No. _____ Activity Type _____ Effective Date _____ Expiration 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
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Business Address	City	State	Zip Code
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Federal Identification No.	Social Security No.	Contractor's Board License No.
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Name of Principal Owner (Please Print)	Principal Owner's Telephone No.
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Principal Owner's Address	City	State	Zip Code
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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
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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
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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
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Applicant's Residence Address	City	State	Zip Code
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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
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Witness Signature - (Business License Office Employee)	Name of City or County
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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: _____

Social Security Number: _____

-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