



City of Fernley

Business License Application

New Business

Change Existing

Applicant Information			
Business Name:			
Business: Owner(s):			DBA:
Physical address:			
City:	State:	Zip Code:	Email:
Type of Organization (select one)	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Partnership		
Mailing address (if different than physical):			
City:	State:	ZIP Code:	
NV Contractor #	Nevada Business ID #	Phone #	
Business Activities			
Description of business activities:			
Specialty business: <input type="checkbox"/> Pawn/Second Hand <input type="checkbox"/> Sexually Oriented <input type="checkbox"/> Auto Pawn <input type="checkbox"/> Check Cashing OTHER: <input type="checkbox"/> Child Care <input type="checkbox"/> Gaming <input type="checkbox"/> Liquor			# of Employees: Other State License Required:
Background Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	Retail Sales Permit:	Liquor License:	
Business Category: <input type="checkbox"/> Home Occupation <input type="checkbox"/> Commercial <input type="checkbox"/> Out of TOWN (not in Fernley) <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Hobby/Crafter			Child Care: # if children cared for _____ State License <input type="checkbox"/> Yes <input type="checkbox"/> No
Gross Receipts Declaration (if applicable)			
Name of a person certifying gross receipts declaration:			
Title:		Contact Phone #:	
Gross Receipts Declaration (if applicable): \$		Dates included: to	
Certification:			
<p>I, the undersigned have answered all questions in the above application, and to the best of my belief all answers are true and correct. I further understand that disclosure of any false or misleading information or any incomplete answers in the above could result in the automatic denial, or revocation, if the license has already been issued. In addition, I acknowledge and understand the following:</p> <ol style="list-style-type: none"> 1. I cannot commence operation until such time as the required department approvals have been obtained, including but not limited to State Health Permit, Building Inspections, Fire Inspections, and Planning Department approval. 2. I cannot commence operation until the licensing department has approved the application 3. I must notify the licensing department, in writing, of any changes including business ownership, name change, address, telephone number, key employee, etc. 4. I may not operate the business for which this application is made at any other address than that listed on the application. 5. I am responsible for maintaining current and active licenses applicable to the operation of the business, including ensuring the payment of fees in accordance with the licensing category. 6. I accept that payments must be received by the City prior to the due date and that a postmark shall not be recognized as meeting this requirement. 7. I am not required to be notified by the licensing department when license fees are due and payable and failure to do so by the department to provide such notice does not constitute a waiver of the payment of license or delinquency fees. 8. I may be subject to issuance of a misdemeanor citation for each and every day I am in violation of any of the above. 9. Should this application be granted, I accept the same subject terms and provisions thereof and further acknowledge that I am subject to all current provisions of Fernley Municipal Code and Fernley Development Code, as well as such rules and regulations as may at any time be adopted or enacted by the Fernley City Council and specifically agree to observe and keep all of the provisions of such ordinances. 			
Signature of Applicant:			Date:

<u>Department</u>	<u>Phone</u>	<u>Signature and Date</u>
North Lyon County Fire Department	(775) 575-3310	
City of Fernley Planning Department	(775) 784-9900	
City of Fernley Building Department	(775) 784-9829	
City of Fernley Public Works Department	(775) 784-9910	
Nevada State Health Department	(775) 687-7533	

It is your responsibility to obtain inspection appointments and applicable signatures before submitting application

All new business license applications will be assessed a one-time \$25 processing fee in addition to annual license fee.

Gross receipts fee schedule for **commercial businesses** located within Fernley city limits: gross revenue from both sales and services shall be considered. See Resolution # 16-027 for business license fee schedule.

The step-by-step process for obtaining a business license with the City of Fernley is outlined in our "Business License Guide", available on the website www.cityoffernley.org or from the City Clerk's office.

Send all payments to:

City Clerk's Office
595 Silver Lace Blvd
Fernley, NV 89408

You may also renew your City of Fernley business license online via the State of Nevada Silver Flume Business Portal: <https://nvsilverflume.gov/home>

Questions? Call us at (775) 784-9830 or email at cityclerk@cityoffernley.org, fax (775) 784-9839

OFFICIAL USE ONLY			
Account #:	BL #:	Date of Application:	
Payment Type:	Amount Paid:	Employee:	
Date Approved:	License Restrictions:		