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# Department of Business License

Vincent V. Queano, Director

500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR

BOX 551810

LAS VEGAS, NEVADA 89155-1810

Phone: (702) 455-4252

Toll Free: (800) 328-4813

Fax: (702) 386-2168

<http://www.clarkcountynv.gov/businesslicense>

## RODEO APPLICATION CHECKLIST

### APPLICATION PACKET (Please provide copies of all documents upon submission)

- **“AM I IN CLARK COUNTY?”/ DETERMINE JURISDICTION AND LAND USE:**  
To confirm if the business address is located within the jurisdiction of unincorporated Clark County, the type of business activities permitted by zoning district, and for information regarding online land use application submittals.
  - **Comprehensive Planning Contact Information:** Website: <https://www.clarkcountynv.gov/comprehensive-planning/Pages/forms.aspx>;; Email: [zoning@clarkcountynv.gov](mailto:zoning@clarkcountynv.gov); Telephone: 702-455-4314
- **REGISTER/OBTAIN STATE LICENSE WITH THE NEVADA SECRETARY OF STATE:**  
State law requires all businesses, corporations, and partnerships operating in the State of Nevada to have a State Business License. All corporations, limited liability companies, partnerships, sole proprietorships, etc. are required to register their entities. Please visit the [Nevada Secretary of State’s website](#) for more information. You may also apply online at [nvsilverflume.gov](http://nvsilverflume.gov).
  - **Secretary of State Contact Information:** Website: <https://www.nvsos.gov/sos>; Telephone: 702-455-4314; Location: inside North Las Vegas City Hall, 2250 N. Las Vegas Blvd., Suite 400, North Las Vegas, NV 89030
- **REGISTER WITH THE NEVADA DEPARTMENT OF TAXATION:**  
You can now register online by visiting the [Nevada Department of Taxation website](#) or apply online at [nvsilverflume.gov](http://nvsilverflume.gov).
  - **Nevada Department of Taxation Information:** Website: <https://tax.nv.gov/>; Telephone: 702-486-2300; Location: 700 E. Warm Springs Rd., 2nd Floor, Las Vegas, NV 89119.
- *(If applicable)* **REGISTER YOUR BUSINESS NAME (DBA):**  
Businesses operating under a fictitious firm/doing business as (any name other than the business owner’s legal name or the entity name registered with the Nevada Secretary of State) must file for a Fictitious Firm Name certificate with the [Clark County Clerk’s](#) office. The filing must reflect the Entity Type listed with the Secretary of State.
  - *Note: A Fictitious Firm Name (DBA) is the name your business will use when advertising, including on storefronts, business cards, websites, etc. Advertising under more than one name will require multiple business licenses.*
    - Example: John Doe dba “Handy Janitorial” (Sole Proprietor), ABC LLC dba “ABC” (Limited Liability Company), 123 Inc. dba “The Rock Star Group” (Corporation)
  - **Clark County Clerk’s Contact Information:** Telephone: 702-455-4431; Website: [https://www.clarkcountynv.gov/government/elected\\_officials/county\\_clerk/location\\_and\\_hours.php](https://www.clarkcountynv.gov/government/elected_officials/county_clerk/location_and_hours.php).
- **PROOF OF PHYSICAL LOCATION REQUIRED:**  
At time of application, you must provide proof of right to the business location. Physical locations are required for all applications; *mailboxes or P.O. Boxes are not accepted*. Complete the Landlord/Lessor information section on Clark County Business License Application, if applicable.
- **COMPLETE CLARK COUNTY APPLICATION:**  
As part of your business license application packet, you will be asked to provide the following:
  - Required attachments:
    - Prior to issuing a license, a copy of your State Business License from the Nevada Secretary of State; and
    - A letter of authorization, or power of attorney, if applying on behalf of applicant(s); and
- **COMPLETE TEMPORARY LICENSE APPLICATION:**
  - Necessary part of the approval process for eligible application granting a temporary license to operate for six (6) to eight (8) weeks.
- **PAY APPLICABLE FEES:**  
Fees in the amount of \$45.00 one-time **non-refundable** application fee. Prior to being granted a license the following will be due, the permit license fee of \$300 for a total of \$345.00 during the application process. *If charging Admission, please also apply for “Admission Fees”.*

### FINANCIAL PACKET (Please provide copies of all documents upon submission)

- One (1) Original Business Supplemental Questionnaire (BSQ) for the business. Complete the packet in **black** ink, initial each page.
  - Notarize the following sections: Statement of Truth, Authorization for Release of Information and Claims Indemnity, and Affidavit of Full Disclosure
- One (1) copy of owner’s personal and business tax returns from the last three (3) years; both personal and business taxes for each owner.
- One (1) copy of owner’s and business’s bank statements from the last three (3) months, all pages including blank pages; both personal and business accounts for each owner.

### LVMPD APPLICATION PACKET (Please provide copies of all documents upon submission)

- Original completed “Personal History Questionnaire” for each owner, must include:
  - Two (2) original completed Requests for Authorization *per owner*
  - Ensure each page is initialed, notarize sections, use **black** ink, and use “N/A”, “Unavailable”, or “Unknown” where necessary
- *(if applicable)* Attach military discharge DD-214
- For each owner:
  - Include U.S. Certificate of Naturalization documents or copy of US birth certificate *for each owner*; OR
  - Include U.S. Immigration Documents (U.S. Green Card/U.S. Red Card, Employment Authorization *for each owner*)
- Include one (1) copy of owner’s active passport *for each owner*
  - Note: This requirement does not apply if the passport is expired or the applicant has never had one.
- One (1) *front & back* copy of Driver’s License *for each owner*
- Two (2) identical passport sized color photographs *for each owner*
- Corporate check(s), cashier’s check(s) or money order(s) payable to “LVMPD” in the amount of \$300.00 for each owner. (No personal checks.)

PLEASE RETAIN A COPY OF COMPLETED FORMS FOR YOUR RECORD



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# CLARK COUNTY BUSINESS LICENSE APPLICATION

500 S Grand Central Pkwy, 3rd Floor, Las Vegas NV 89155-1810

(702) 455-4252 • Toll Free: (800) 328-4813 • Fax (702) 386-2168

<http://www.clarkcountynv.gov/businesslicense>

Each application for business license shall be accompanied by a **\$45.00 non-refundable application processing fee**  
**ADDITIONAL FEES APPLY BASED ON LICENSE CATEGORY.**

Please be advised that the information provided may be subject to public records disclosure and will appear on the Business License public website & Public Information reports.  
 Use **BLACK INK** only! Any incomplete, illegible or altered applications will not be accepted for processing.

<b>A</b>	<b>BUSINESS INFORMATION</b>		<b>Fictitious Firm Name</b>		<b>Classification or Category</b>		
	Business Name:		Doing Business As:		NAICS Code:		
<b>B</b>	<b>BUSINESS OWNERSHIP must total 100%. List all business owners and/or officers (Attach additional pages as needed).</b>						
	Type of Business Ownership (Please select one)		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership				
	Name and Address of Business Owner(s), Officer(s)/Director(s), or Member(s)/Manager(s)		Name: Last, First, MI, or Corporation/LLC		Title		
			Address Line 1		Address Line 2		
			City	State	Zip	% Owned	
	Name and Address of Business Owner(s), Officer(s)/Director(s), or Member(s)/Manager(s)  <i>(Attach additional pages as needed)</i>		Name: Last, First, MI, or Corporation/LLC		Title		
Address Line 1			Address Line 2				
City			State	Zip	% Owned		
<b>C</b>	<b>BUSINESS BASICS and CONTACT INFORMATION</b>						
	Business Location		Location Address Line 1		Location Address Line 2		
			City	State	Zip Code	Country	
			Email Address		Business Phone No.		Business Fax No.
	Mailing Address <i>(If same as location, please indicate "location")</i>		Mailing Address Line 1		Mailing Address Line 2		
			City	State	Zip Code	Country	
	Authorized Contact Info		Authorized Contact Last Name		Authorized Contact First Name		Auth. Contact MI
			Email address		Primary Phone		Cell Phone
	Business Location Information		<input type="checkbox"/> Owned (If owned proceed to " <b>Describe all business activity</b> " at the top of the next page) <input type="checkbox"/> Leased (If leased please provide the following information for our records)				
			Lessor Name (Last, First, MI or Company Name)			Lessor Phone	
Lessor Address Line 1			Lessor Address Line 2				
City			State	Zip Code	Country		

<b>C</b>	<b>Describe all Business Activity:</b>		
	<b>Date your business started at this location:</b>		
	<b>Have you complied with the provisions of NRS 244.33505 Industrial Insurance? (Please check with your worker's compensation carrier for additional information)</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>Have you purchased a business currently operating in Clark County? Are you requesting a Temporary License?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>IF YOU PURCHASED THIS BUSINESS AND IT IS CURRENTLY OPERATING, COMPLETE THIS SECTION</b>		
	<b>Date Business Purchased:</b>	<b>Clark County Business License No.:</b>	<b>Owners Name:</b>
		<b>Number of Employees:</b>	<b>Square Footage of Premises:</b>
	<b>Does this business require a Professional or Occupational License issued by a State Board?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>(For example: Cosmetology, Medical or Massage Board; Real Estate or NV Financial Division)</i> <b>If your answer is "Yes" please provide Name of Board:</b>		
	<b>BUSINESS QUESTIONS</b>		
<b>D</b>	<b>Have you registered with the Nevada Secretary of State?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>NV Business ID (required)</b>
	<b>I certify the information provided herein and attached is true and accurate to the best of my knowledge. I understand that providing false, misleading or fraudulent statements on this application or supporting documentation may be grounds for denial of this license or later revocation, suspension or non-renewal.</b>		
	<b>Signature:</b>	<b>Print Name:</b>	<b>Date:</b>



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## RODEO PERMIT APPLICATION

### ALL APPLICATIONS REQUIRE THE FOLLOWING

- A completed *Rodeo Permit Application* (attached):
  - **Line 1:** The first line of this form calls for your business name (or your name), two (2) phone numbers where you can be reached, and an email address.
  - **Line 2:** Asks for the business address (or your address, if applicable.)
  - **Line 3:** Is the mailing address for correspondence, and only applicable if different from the business address.
  - **Line 4:** This line applies only to businesses that are incorporated or organized and filed with the Nevada Secretary of State as a legal entity. Please provide the name and address as it appears on the state registration.
  - **Contact Information:** Please indicate who you want contacted regarding the event and the contact phone number.
  - **Rodeo Permit Calendar:** There is space for five (5) rodeo events on the “Application for Rodeo Permit”, please attach any additional events on a separate sheet of paper.
  - **Signature line:** The owner should sign the form, print their name and date the signature.
- Fees for this application in the amount of \$345. (\$45 non-refundable application fee plus \$300 permit fee for rodeo permit.)
  - Payment can be made by mail to the address included above via check, cashier’s check, or money order made payable to: Clark County Business License.
- *Note:* Use one application per location. Rodeo Events with multiple event locations will require multiple permit applications.

### OTHER ACTIVITIES

- A rodeo permit does not include any licenses/ permits for any other activities performed or offered in conjunction with a rodeo.
- If there are activities conducted with your event in addition to the rodeo you may be required to obtain business licenses in conjunction with your permit.
- Common associated licenses include, but are not limited to:
  - Valid and current liquor license with Clark County Business License for event location *and* rodeo organizer.
    - Special Event Permit (submitted per event as listed in schedule below if dates are not concurrent)
  - Special Event Permit (through either Clark County Parks and Recreation or Public Works, as applicable)

### PROCESS & APPROVALS

Once the “Application for Rodeo Permit” has been submitted *and the check processed*, Clark County Business License will issue a “Rodeo Permit” *subject to approval* by inspecting agencies. It’s important to know that the “Rodeo Permit” is **not** valid until inspected and approved on the face of the form by the agencies shown. It is the responsibility of the business owner to ensure that inspections will be completed *no later than the first day of the event*. To make arrangement for inspections and sign off, the agencies have provided information below. It may be necessary to visit their offices to obtain signatures so that your permit is complete by your event date. The completed “Rodeo Permit” must be available at the event location on the day of the event.

### CONTACT INFORMATION

<b>Clark County Zoning</b> Phone: (702) 455-4314 Address: Clark County Govt. Center, 1 <sup>st</sup> Floor 500 S. Grand Central Pkwy Las Vegas, NV 89155	<b>Clark County Public Works</b> Phone: (702) 455-6029 Address: Clark County Govt. Center, 2 <sup>nd</sup> Floor 500 S. Grand Central Pkwy Las Vegas, NV 89155
<b>Clark County Building Department</b> Phone: (702) 455-7410 Address: 4701 W. Russell Rd. Las Vegas, NV 89118	<b>Clark County Animal Control</b> Phone: (702) 455-7710 Address: 2901 E. Sunset Rd. Las Vegas, NV 89120
<b>Clark County Fire Department</b> Phone: (702) 455-7317 Address: 575 E. Flamingo Rd. Las Vegas, NV 89119	<b>Clark County Environment and Sustainability Department</b> Phone: (702) 455-5942 Address: Clark County Govt. Center, 1 <sup>st</sup> Floor 500 S. Grand Central Pkwy Las Vegas, NV 89155
<b>Las Vegas Metropolitan Police Department (Special Events)</b> Phone: (702) 828-3442 Address: 400 S. Martin L. King Blvd. Las Vegas, NV 89106	<b>Southern Nevada Health District</b> Phone: (702) 729-1528 Address: 625 Shadow Lane Las Vegas, NV 89106



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## RODEO PERMIT APPLICATION

- Please fill out form completely; use **black** ink only; *incomplete, illegible, or altered application forms will be returned.*
- Payments can be made by cash, check, or money order made payable to: Clark County Department of Business License.

### BUSINESS INFORMATION

Entity/ Business Name:

Business Phone Number:

Alternate Contact Phone Number:

Business Email Address:

### BUSINESS LOCATION AND CONTACT INFORMATION

#### Business/ Mailing Address

Business Address:

City/ State:

Zip Code

Country:

Check here if Mailing Address is the same as the Business Address. If different, please provide current mailing address on next line.

Mailing Address:

City/ State:

Zip Code

Country:

Corporation Name/ Address (if applicable):

City/ State:

Zip Code

Country:

#### Contact Information

Contact Name/ Person in Charge: (First, M.I., Last)

Email Address:

Primary Phone:

Alternate Phone:

### RODEO PERMIT CALENDAR

Location of Rodeo (Street Address, City, State, Zip Code):

Rodeo Start Date:

Rodeo End Date:

Use one application per location. Rodeo Events with multiple event locations will require multiple permit applications.

### SIGNATURES (requires signatures of owner, officer, authorized or legal signer)

I certify the information provided herein and attached is true and accurate to the best of my knowledge. I understand that providing false, misleading or fraudulent statements on this application or supporting documentation may be grounds for denial of this license or later revocation, suspension or non-renewal.

Applicant's Signature

Print Name and Title

Date

#### FOR OFFICIAL USE ONLY

Parks and Recreation	<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A	Reviewed by:		Date:	
Zoning	<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A	Reviewed by:		Date:	
Business License Staff	<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove	Reviewed by:		Date:	
CCBL Director	<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove	Signed:		Date:	