



Department of Business License

500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR

BOX 551810
LAS VEGAS, NEVADA 89155-1810
(702) 455-4252
(800) 328-4813
FAX (702) 386-2168

http://www.clarkcountynv.gov/business_license

REQUEST FOR DUPLICATE LICENSE

Business Name: _____

Business Address: _____

City, State Zip: _____

License Reprint Fee \$5.00

Business License Number: _____

Business Owner(s) Name(s): _____

Contact Telephone Numbers(s): _____

*PLEASE SELECT ONE OF THE FOLLOWING:

- I would like you to send a duplicate license to us this one-time at the **TEMPORARY** mailing address below:

Business Name: _____

Address: _____

City/State/Zip: _____

- I would like you to change our mailing address and send a duplicate license to us at the **PERMANENT** mailing address below:

Business Name: _____

Address: _____

City/State/Zip: _____

Please submit this form along with \$5.00 to:

Clark County Business License,
500 S Grand Central Pky 3rd Flr
Box 551810
Las Vegas, NV 89155-1810

Signature of Requestor: _____ Date: _____