



## Department of Business License

500 SOUTH GRAND CENTRAL PKY, 3<sup>RD</sup> FLOOR  
BOX 551810  
LAS VEGAS, NEVADA 89155-1810  
(702) 455-4252  
(800) 328-4813  
FAX (702) 386-2168  
[http://www.clarkcountynv.gov/business\\_license](http://www.clarkcountynv.gov/business_license)

Dear Rodeo Applicant:

This information is being provided to help with the application process for a Rodeo Permit. There are 2 items required from you. They are:

1. A check in the amount of \$345 payable to Clark County Business License
2. A completed *Application for Rodeo Permit* (attached):

**Line 1:** The first line of this form calls for your business name (or your name), phone number where we can reach you, and a fax number

**Line 2:** Asks for the business address (or your address) and a cell number

**Line 3:** Is the mailing address for correspondence and an e-mail 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.

**Dates of Rodeo:** There is space for 5 Rodeo events on the Application for Rodeo Permit, please attach any additional events on a separate sheet of paper

**Name of Contact:** Please indicate who you want contacted regarding the event and the contact phone number.

**Signature line:** The owner should sign the form, print their name and date the signature

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.

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.

**Zoning :**

Phone: (702) 455-4314  
Address: Clark County Gov Cntr, 1<sup>st</sup> Flr  
500 S. Grand Central Pkwy  
Las Vegas, Nevada 89155

**Health Dept:**

Phone: (702) 759-1258  
Address: 625 Shadow Lane  
Las Vegas, NV 89106

**Building Dept:**

Phone: (702) 455-7410  
Address: 4701 W Russell Rd  
Las Vegas, NV 89118

**Animal Control:**

Phone: (702) 455-7710  
Address: 2901 E. Sunset Rd  
Las Vegas, NV 89120

**Fire Dept:**

Phone: (702) 455-7316  
Address: 575 E. Flamingo Rd  
Las Vegas, Nevada 89119

**Air Quality:**

Phone: (702) 455-5942  
Address: Clark County Gov Cntr, 1<sup>st</sup> Flr  
Las Vegas, Nevada 89155

**Public Works:**

Phone: (702) 455-6029  
Address: Clark County Gov Cntr, 2nd Flr  
500 S. Grand Central Pkwy  
Las Vegas, Nevada 89155

**Metro:**

**Special Events:**

Phone: (702) 828-3442

We wish you the best of luck with your upcoming Rodeos and other events.

Cordially,

Clark County Business License  
(702) 455-0174



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## Application for Rodeo Permit

BUSINESS INFORMATION:			
Business Name	Business Phone		Business Fax
Business Address	City & State	Zip Code	Cellular Number
Mailing Address	City & State	Zip Code	E-Mail Address
Corporation Name and Address if applicable	City & State	Zip Code	E-Mail Address

**Dates of Rodeo: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Location of Rodeo:** \_\_\_\_\_

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**Location of Rodeo:** \_\_\_\_\_

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**Location of Rodeo:** \_\_\_\_\_

**Dates of Rodeo: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Location of Rodeo:** \_\_\_\_\_

(If you need more room for locations, descriptions, and times, you may submit the information on an additional form or a separate sheet of paper.)

**Name of Contact or Person in Charge:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I CERTIFY THE INFORMATION PROVIDED HEREIN AND ATTACHED IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Signature	Print Name	Date