

## Department of Business License 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

## SHORT-TERM RENTAL UNIT APPLICATION SUPPLEMENTAL

• Please submit the necessary number of attestations as applicable for all natural persons associated with the ownership as		
recorded with the Clark County Assessor's office.  BUSINESS INFORMATION		
Date: Business/ Entity Name:		
Dusiness/ Entity Name.		
Property Address:	City/ State:	Zip Code:
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A TEMPERATE A TEXANIA		
ATTESTATIONS  I hereby attest to the following statements:		
1. The property address submitted for licensure is not precluded from operation by any provision contained in Chapter 7.100 –		
Short-Term Rental Units of the Clark County Code.		
2. If the property is located in a common-interest community, I understand that the property is ineligible for licensure unless I		
have provided evidence the governing documents expressly authorize the use of a property as a short-term rental unit for transient lodging purposes. (CCC 7.100.080(e)(3) & 7.100.090(c)(5))		
3. I understand, and have complied with, all eligibility standards for property owners as detailed. I further attest that all persons		
involved with the ownership of the property address including, but not limited to, shareholders, partners, members,		
managers, officers, principals, settlors, trustees, and/or beneficiaries, as applicable, are all natural persons and aged 18 years		
or older, and that all required documentation related to their identities has been provided to the Department of Business		
License. (CCC 7.100.060)		
4. I understand that any license, if granted, for the operation of a short-term rental unit is not transferable for any reason to		
another person, entity, or location address, including a prohibition on transfer of ownership. (CCC 7.100.140 & 7.100.150)		
5. My eligibility for annual license renewal is contingent upon meeting annual renewal requirements, including delivering any		
records and payment of any inspection fees due to applicable departments of Clark County. (CCC 7.100.130)		
6. I have read and understand the provisions contained in Chapter 7.100 – Short-Term Rental Units of the Clark County Code,		
including all duties, obligations, and requirements in Section 7.100.170 and prohibited conduct as detailed in Section		
7.100.180.		
7. All information submitted in both the general business license application and Short-Term Rental Unit Application		
Supplemental for the property address listed is true and accurate to the best of my knowledge.		
SIGNATURES (requires signatures of owner, officer, authorized or legal signer)		
I,, declare that the above statements are true, accurate, and complete to the best of my knowledge.		
, declare that the above statements are true, accurate, and complete to the best of my knowledge.		
In WITNESS WHEREOF, I have executed this request at	on the day	
of, 20		
01		
Signature:		
Title:		
		1
	Subscribed and sworn to before me this	aay
	of	, 20
Notary Public in and for said County and State		
FOR OFFICIAL USE ONLY		
CCBL Application Number:	CCBL License Number:	