



**Business License Application within the City Limits
of Sparks - Temporary License**

Business License Fees ~

\$19 Temporary License Fee

Please complete all forms in the application packet in their entirety. If you have any questions regarding the requested information, please contact our office at:

775-353-2360.

Incomplete applications will not be accepted.

City of Sparks Business License Application Guidelines

Our job in the Business License Division is to help guide applicants through the process of starting a business in the City of Sparks. **Items 1-4 are required prior to submitting any Business License application.** All City of Sparks applications and forms are available in our office at City Hall, 431 Prater Way, Sparks, online at www.cityofsparks.us or via email by request. Please don't hesitate to contact our office with questions at 775-353-2360 weekdays from 8:00am – 5:00pm or via email at business@cityofsparks.us.

- 1. State Business License:** Per NRS 364A, all applicants are required to register for a State Business License with the Nevada Secretary of State's Office. The State Business License registration can be completed online through the State of Nevada SilverFlume website, www.nvsilverflume.gov or in person at their office located at 202 North Carson Street, Carson City, NV 89701. Proof of registration is required with the City Business License application. Please contact 775-684-5708 with questions regarding the State Business License Requirement.
- 2. Nevada State Department of Taxation:** All entities conducting business in Nevada, must register with the Nevada Department of Taxation. The sales and use tax permit registration can be completed online through the State of Nevada SilverFlume website, www.nvsilverflume.gov or in person at 4600 Kietzke Lane, Bldg L, Suite 235, Reno, NV 89502. Proof of registration is required with any City Business License application. Please contact 866-962-3707 with questions regarding the State Taxation Registration Requirement.
- 3. State Industrial Insurance:** The State requires that a Workers' Compensation Insurance form be filled out and submitted. The affidavit of compliance can be completed online through the State of Nevada SilverFlume website, www.nvsilverflume.gov or submitted in person with the business license application. Any business having employees will need the insurance policy number and expiration date of the policy in order to complete the affidavit of compliance. Please contact your insurance company with questions regarding Workers' Compensation Insurance.
- 4. Fictitious Firm Name:** If the business is utilizing a fictitious firm name in place of the owners' legal first and last name, also known as a DBA (doing business as), it must be registered with the Washoe County Clerk's Office. The office is located at 1001 E. 9th Street, Bldg A, First Floor, Reno, NV 89512. Proof of registration is required with the City Business License application. Please contact 775-784-7260 with questions regarding Fictitious Firm Names.

Submitting the Application Packet

Business License applications may take a **minimum of 4 weeks** to process. Please plan accordingly. Please ensure that all forms included in the packet are complete and submitted with the application to avoid delays in processing. Incomplete applications **will not** be accepted until all necessary information is provided to the Business License Division. Initial application and review fees can vary depending on reviews needed and the type of business you are conducting. Please call the Business License Division for an accurate fee quote. Appropriate fees must be submitted with the application packet at the time of submission. You may submit your application in person at City Hall at the Customer Service Counter or by mail to the City of Sparks Business License Division.



431 Prater Way
 PO Box 857
 Sparks, NV 89432
 775-353-2360

www.cityofsparks.us

- A. Unless otherwise provided in or exempted by this title, any person who transacts or conducts any business in the city on a temporary basis may obtain a temporary business license from the city authorizing that temporary business. Any such person shall comply with all applicable provisions of this title.
- B. The transacting or conducting of business through a temporary business license shall not exceed six consecutive calendar days.
- C. Additional temporary business licenses shall not be obtained by the same entity within seven calendar days of a previous temporary business license expiration date.
- D. An entity may obtain a maximum of six temporary business licenses within a consecutive 12-month period.
- E. The fee for a temporary business license shall be \$15.00 plus the technology fee pursuant to SMC [5.12.103](#).

TEMPORARY BUSINESS LICENSE APPLICATION

Event Start Date _____

Please type or print in black or blue ink only.

Event End Date _____

NOT TO EXCEED 6 DAYS

01) Corporate Name/Business Name: _____

02) Doing Business in Nevada as (DBA): _____

03) Event Location (no PO Boxes): _____ Suite #: _____ **04)** Federal Tax ID#(EIN): _____

05) City: _____ **06)** State: _____ **07)** Zip Code: _____ **08)** Bus. Phone: _____

9) Mailing Address: _____ **10)** Bus. Fax: _____

11) City: _____ **12)** State: _____ **13)** Zip Code: _____ **14)** E-mail: _____

15) Business Entity Type: ___ Sole Proprietor ___ Corporation ___ Partnership ___ LLC ___ Association **16)** Professional License #: _____

17) Describe the nature of business to be conducted (be specific and complete):

18) Event Producer (if applicable)	19) Event Hours	20) no
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List Individual Licensee

21) Licensee Name: _____ **22)** Title: _____ **23)** Phone: _____

24) Home Address: _____ **25)** Alt Phone: _____

26) City: _____ **27)** State: _____ **28)** Zip Code: _____

List Individuals with Interest or Ownership in the Business

29) Full Name	Title	Address	DOB

Emergency Contact/Local Contact Information

30) Name: _____	31) Phone: _____	Official Use Only
32) Has any applying individual, or any member of this applying firm, has been convicted in this state, or elsewhere, within the past ten years of any offense, not including minor traffic offenses? Yes ___ No ___ If yes, please state the offense(s), the year of conviction(s), and the punishment assessed therefore: _____ _____		Total Amount Paid _____ Date Paid _____ Receipt # _____ Sewer Account # _____ Parcel # _____ License # _____ Activity Type _____ Effective Date _____ Expiration Date _____
I, THE UNDERSIGNED, UNDERSTAND THAT: (1) IT IS UNLAWFUL FOR ANY PERSON TO TRANSACT OR CONDUCT ANY BUSINESS WITHOUT FIRST HAVING OBTAINED A BUSINESS LICENSE; (2) THIS DOCUMENT IS AN APPLICATION ONLY AND CERTAIN CONDITIONS MUST BE MET BEFORE A BUSINESS LICENSE WILL BE ISSUED TO ME; (3) I CERTIFY THE INFORMATION SUBMITTED ON AND WITH THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		
33) Licensee Signature: _____	34) Title: _____	
35) Date: _____		
Event Type ___ Special Activity ___ Special Event Street/Sidewalk Vendor ___ Temporary Merchant		



PO Box 857
Sparks, NV 89432
775-353-2360
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Event Details:

Anticipated Daily Attendance* _____ Anticipated Total Attendance* _____

Open to the Public* Yes No

Will Admission Be Charged* Yes No If yes Admission Fee \$ _____

Amplified Sound/Multimedia* Yes No Street/Sidewalk Occupancy* Yes No

Alcohol Service* Yes No Food/Beverage Service* Yes No

Privileged Secondhand Sales* Yes No Park Usage* Yes No

If you are the event promotor:

Number of Booths _____ Number Of Vendors/Exhibitors _____

Event Set Up* Yes No

FIRE HAZARD CHECKLIST

- Flammable or Compressed Gasses
- Cooking Vendors
- Exit Obstructions
- Indoor Vehicle Display
- Bleachers
- SEPARATE PERMIT MAY BE REQUIRED:
- Open Flame Devices
- Tents in Excess of 200 SQ FT
- Pyrotechnics
- Fire Lane or Hydrant Obstruction
- Fenced Area/Building Occupied by 50 or More People
- Temporary Electrical Wiring
- Dust or Spark Production
- Loose Seats/Chairs over 200
- Canopies in Excess of 400 SQ FT
- Indoor Demonstration Cooking

DISPOSAL AND RECYCLING PLAN

Existing City-ownded Trash Receptacles Yes No

Refuse Removal Plan _____

STATE OF NEVADA, DIVISION OF INDUSTRIAL RELATIONS
AFFIRMATION OF COMPLIANCE
WITH MANDATORY INDUSTRIAL INSURANCE REQUIREMENTS

(Instructions with Definitions are located on reverse side)

Business Name (Include any name doing business as)	Type of Business	Business Telephone Number
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Business Address	City	State	Zip Code
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Federal Identification No.	Social Security No.	Contractor's Board License No.
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Name of Principal Owner (Please Print)	Principal Owner's Telephone No.
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Principal Owner's Address	City	State	Zip Code
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Identified as: (Complete one section only)

That the above identified business has obtained industrial workers' compensation insurance as required by Chapter 616A to D, inclusive, of the Nevada Revised Statutes (NRS):

Effective Date of Coverage	Account Number
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That the above identified business is not subject to the provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes, due to a statutory exemption or as a business which has no employees nor hires any independent contractor or subcontractor.

That the above identified business has a valid certificate of self-insurance pursuant to Chapter 616A to D, inclusive, of Nevada Revised Statutes.

Effective Date	Certificate Number
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I declare that I have the authority to act on behalf of the above described business, and am applying for a license to operate said business as a (n): Individual Sole Proprietor Partnership Corporation

Name of Applicant (Please Print)	Applicant's Telephone Number
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Applicant's Residence Address	City	State	Zip Code
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I do hereby affirm that the above information is true and correct.

DATED this _____ day of _____, 20_____.

Signature of Applicant (To be signed in the presence of the business license office employee)	Applicant's Title
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Witness Signature - (Business License Office Employee)	Name of City or County
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If unable to sign this document in the presence of a Business License Employee, the Applicant's signature must be notarized.

SUBSCRIBED and SWORN to before me on this _____ day of _____, 20_____.

NOTARY PUBLIC

INSTRUCTIONS

The provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes require every person, firm, voluntary association, and private corporation, including any public service corporation, which has any person, subcontractor, or independent contractor, under contract of hire, to obtain industrial insurance coverage in Nevada or obtain a certificate of self-insurance from the Nevada Commissioner of Insurance. **Subcontractors and independent contractors engaged in the same trade, business, profession or occupation as the hiring person or business, are by law considered to be employees.** One exception to the requirement for industrial insurance is if you or your business hires no employees, subcontractors or independent contractors. You are not required to obtain industrial insurance coverage for the following employees: theatrical or stage performers; casual musicians; household domestics, farm, dairy, agricultural or horticultural laborers, or persons engaged in stock or poultry raising; voluntary ski patrolmen; real estate brokers and/or salesmen; direct sellers; or clergy. Businesses, which elect to obtain industrial insurance coverage for such persons, gain valuable rights and significantly reduce liabilities for injuries to these persons. **A business which hires persons who are exempt from the provisions of Chapter 616A to 617, inclusive, of the Nevada Revised Statutes may be held liable in tort for injuries to those persons.** A business, which hires exempt persons, may elect to obtain industrial insurance, including sole proprietor coverage and partnerships.

IMPORTANT NOTICE: Pursuant to the provisions of NRS 616D.200(1): Any employer within the provisions of NRS 616B.633 who fails to provide, secure or maintain compensation as required by the terms of this chapter, is: (a) for the first offense, guilty of a **misdemeanor** and (b) for a second or subsequent offense committed within 7 years after the previous offense, guilty of a **category D felony**.

Definitions for Purposes of this Affirmation:

“Applicant” is the person executing this document

“Business Name” is the name under which the business will operate, including the identification of any other names under which the entity will do business.

“Corporation” is a business which is incorporated in the state of Nevada or in any other state, and which is recognized as an active corporation by the Secretary of State for the State of Nevada.

“Type of Business” means the nature of the business...

“Individual” is a person who operates a business which hires no employees, subcontractors, or independent contractors.

“Partnership” is a business, which is owned and operated by two or more individuals who share ownership rights to the net profits of the business and who share in all the liabilities of that business. A limited partnership is included in the term partnership if the limited partners are investors only, and do not perform services for the business.

“Principal Owner” is the owner, sole operator, designated general partner, or resident agent for the corporation.

“Sole Proprietor” is a self-employed owner of an unincorporated business and includes working partners and members of working associations, which may or may not hire employees.