



# Lincoln County

## Business License Application

Business Name: \_\_\_\_\_ License # \_\_\_\_\_

Contact Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

(If application is being made by a partnership, we must have the full legal name of each partner.)

Full Name and Address of Partner: \_\_\_\_\_

Full Name and Address of Partner: \_\_\_\_\_

Corporation Name: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

Resident Agent/Operating Officer: \_\_\_\_\_

Corporation Address: \_\_\_\_\_

NAICS Code: \_\_\_\_\_ Fictitious Name: \_\_\_\_\_

What is the nature of the business? \_\_\_\_\_

### **Conditions of the License – Please initial each of the following:**

\_\_\_\_ License Not Transferable: Any standard business license issued under this Chapter shall not be transferred without the consent of the board.

\_\_\_\_ Posting of License: Any standard business license issued under this Chapter shall be posted by the licensee in a conspicuous place within the business during the entire term for which the license was issued.

\_\_\_\_ Sign Required: Each business licensee shall post a sign and address on the outside of the business that is visible from the roadway.

\_\_\_\_ I understand that I am responsible to update and/or renew this business license once a year, payable June 30<sup>th</sup>, of each year.

**Circle One:**                      Standard License - \$ 70.00                      Temporary (72 Hour) License - \$ 30.00

Signature of Applicant (s): \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

Board Limitations or Restrictions Imposed \_\_\_\_\_

Date License Issued: \_\_\_\_\_ Date License Will Expire: \_\_\_\_\_ Dept. Initials: \_\_\_\_\_

Please Return Application and Payment to:  
Lincoln County Building Department  
P. O. Box 329 Pioche, NV 89043