ROSS MILLER
Nevada Secretary of State
Commercial Recordings Division

Entity Registration/ Business License Compliance Report Form

This form is for providing information about establishments, enterprises or organizations that are allegedly conducting business in Nevada without being registered and/or without maintaining a state business license, or who may have improperly claimed a business license exemption with the Secretary of State.

This form may be downloaded or completed online before printing. If you are unable to do so, please contact Customer Service at (775) 684-5708 for guidance.

Instructions:

- Complete and email this form to: **blcompliance@sos.nv.gov**
- This form may also be submitted via regular mail or fax:

Secretary of State
Commercial Recordings Division
Attn: Business Compliance Division
202 N. Carson Street
Carson City, NV 89701-4201

Telephone: 775-684-5708
Fax: 775-684-5725
Website: www.nvsos.gov

All information provided is deemed confidential and will not be available for public inspection except otherwise required by law. Based on information provided, an investigation may be initiated. If an investigation is initiated, you will be notified of the findings.

SECTION 1: Complainant Information (Person Completing Form - Required)

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss

Last Name _____ First Name _____ Middle Name _____

Address _____ City _____ State _____ Zip _____

Contact Phone Number: _____

Email Address: _____

SECTION 2: Information About Potentially Fraudulent Business

Name of Entity, Business, Sole Proprietor or General Partnership:

_____

Doing Business as Name (DBA), if known:

_____

Place of Business Address:

Street Address _____ City _____ State _____ Zip _____

Name of Contact Person, if known:

Last Name | First Name | Middle Name

Contact Phone Number:

Email Address:

Business Web Address, if known:

Your affiliation with business, if applicable (employee, customer, acquaintance, neighbor, competitor, etc.):

Description of the allegation and why you believe this person or business may not be compliant:

Please provide any additional information you believe may be helpful in the investigation of the alleged violation:

SECTION 3: Attachments

Attach photocopies of any additional information that might be useful in investigating this complaint or alleged compliance violation(s). Documentary evidence is especially important. Please *do not send originals* as documents will not be returned. You may be contacted for additional information.

Are you willing to testify in a court of law or administrative proceeding regarding this complaint? ☐ **YES** ☐ **NO**

DECLARATION:

In filing this complaint, I declare under penalty of perjury under the Laws of Nevada that the information provided in this complaint is true and correct to the best of my knowledge and that the information may be used by the Secretary of State and other entities to further investigate the complaint or alleged violation(s) of the NRS.

Printed Name of Complainant

X

Signature of Complainant (Required)

Date

Please make sure your response:
- **is complete**
- **is signed**
- **includes all photocopied attachments**