BARBARA K. CEGAVSKE
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov

Nevada State Business License "Other" Exemption

☐ Application

☐ Renewal

USE BLACK INK ONLY - DO NOT HIGHLIGHT **PRINT LEGIBLY OR TYPE ALL INFORMATION**

Completing this form DOES NOT relieve you of any statutory or regulatory requirements relating to your business. You may be required to complete a Nevada Business Registration form with the Nevada Department of Taxation and Department of Employment, Training and Rehabilitation. Please check with these and other state/local government agencies for additional licensing requirements.

***** Asterisks indicate **required** information. Incomplete forms will be rejected.

INSTRUCTIONS:

1. This form is for a business that is not a sole proprietor, partnership or that is not required to organize pursuant to Title 7 of Nevada Revised Statutes and claims an exemption for the State Business License provisions of NRS 76.020.
2. If you are exempt from the requirements of the State Business License pursuant to NRS 76.020 enter the applicable code in Section 4:

   001 - A governmental entity

   002 - 501(c) Nonprofit Entity

   005 - A business whose primary purpose is to create or produce motion pictures

   006 - Insurance company doing business pursuant to NRS 680B.020 that does not conduct any business that is not incidental to Title 57 (Div. of Ins. Authority).
3. Return the completed form to the Secretary of State by fax to (775) 684-5725; by email to newfilings@sos.nv.gov; or, by mail to 202 North Carson Street, Carson City, Nevada 89701-4201.
4. The person claiming exemption from the State Business License requirement must sign the application. ***FORM WILL BE RETURNED IF UNSIGNED.***

1*

Signature must be that of a responsible party.

I declare under penalty of perjury that the information provided is true, correct and complete to the best of my knowledge and belief and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. I declare that I am exempt from the provisions of the State Business License pursuant to NRS 76.020.

First Name | Middle (Optional) | Last Name | Suffix | Title

X _____ Signature of Responsible Party

Date

2

NV Business ID # _____ (Required if you have a current Nevada State Business License or had one issued after October 1, 2009)

3*

Entity Name _____

4*

I am exempt from the requirements of the State Business License. Cite exemption code _____ (See instructions for code)

If claiming 001 exemption: I declare that this entity is an incorporated or unincorporated agency of instrumentality of the U.S. government or any state government; a corporation wholly owned by the U.S. government, or county, city, district, or other political subdivision of a state.

If claiming 005 exemption provide Nevada Film Office Registration # _____

If claiming 006 exemption provide Nevada Division of Insurance License # _____

5*

Physical Address _____ Physical Street Address | City | State | Zip Code

6

Mailing Address (if different) _____ PO Box or Street Address | City | State | Zip Code

7

Entity Phone ( ) _____

8

Email Address _____

Reset