

## MINERAL COUNTY SHERIFF'S OFFICE

P.O. Box 2290 - 105 So. A Street, Suite #4 - Hawthorne, NV 89415  
(775) 945-2434 phone - (775) 945-5484 fax - mcso@sbcglobal.net

THE FORMS INCLUDED IN THIS APPLICATION ARE REQUIREMENTS OF NEVADA REVISED STATUTE AND/OR MINERAL COUNTY CODE. PLEASE FEEL FREE TO CALL OR MAKE AN APPOINTMENT WITH THE MINERAL COUNTY SHERIFF'S BUSINESS OFFICE IF YOU HAVE ANY QUESTIONS THAT HAVE NOT BEEN COVERED BELOW WITH REGARD TO YOUR MINERAL COUNTY BUSINESS LICENSE APPLICATION.

Included with your application are the following forms, please refer to the instructions on completing the forms below:

- Nevada Business Registration Form Instructions
- Nevada Business Registration
- Mineral County Sheriff's Office Supplemental Form and Questionnaire
- Signature Sheet for Appropriate Offices
- Certificate of Business: Fictitious Firm Name
- Application of License

Depending on the type of business you are conducting additional forms may be required. Please advise the business office if you are a professional, which requires a certification by the state, a contractor or subcontractor, serve food or alcohol, have a gambling establishment, provide overnight lodging or have amusements at your business location, i.e., pool tables, video games. If your business requires a health inspection, we recommend you contact the health department immediately. It has been the experience of other businesses that the health inspector may take up to 4 weeks to provide an inspection, not including follow-up inspections.

The fees are due and payable at the time you make application and are non-refundable. These fees are based on the number of employees working in Mineral County and are as follows:

- (a. \$ 40 self employed (husband and wife)
- (b. \$ 80 one employee, one partner
- (c. \$ 120 for 2, 3 and 4 employees, multiple partners
- (d. \$ 200 for license having 5 and 6 employees
- (e. \$ 240 for license having 7 and 8 employees
- (f. \$ 280 for license having 9 to 20 employees
- (g. \$ 340 for license having 21 to 50 employees
- (h. \$ 800 for license having 51 to 150 employees
- (i. \$1200 for license having 151 or more employees.

The fees are prorated on a quarterly basis beginning July 1 ending June 30. The fee shall be 25% less each quarter excluding the final quarter for self employed businesses, which will never be less than \$20.

### Nevada Business Registration Form Instructions

These are the instruction for completing the Nevada Business Registration. This form may also be utilized by additional state agencies when required.

### Nevada Business Registration

Please follow the instructions as provided for in the Nevada Business Registration Form Instruction sheet

### Mineral County Sheriff's Office Supplemental Form and Questionnaire

This form includes questions that must be completed as mandated by Nevada Revised Statute and/or Mineral County Code. The information in this form must be completed. Failure to provide this information will result in the automatic denial of application.

## Signature Sheet for Appropriate Offices

It is your responsibility to obtain signatures from the Mineral County Clerk and the Building and Fire Inspectors prior to submission of application to the Mineral County Sheriff's Business Office. Once the application is completed in its entirety, it will be placed on the Mineral County Board of Commissioners Agenda for formal approval. You will be sent an agenda to the address you provided on the Nevada Business Registration form. Your attendance at the meeting is mandatory, if you are unable to attend the meeting you must notify the Mineral County Clerks' Office at the address above and advised them accordingly. If the Board has any questions regarding your license that cannot be resolved in the meeting your license will be temporarily denied and tabled until you are able to resolve the Boards questions.

## Certificate of Business: Fictitious Firm Name

This form may need to be turned in to the Mineral County Clerks/Treasurers office. This form does not need to be turned in with your Mineral County Business License Application and has been provided for your convenience.

You may be required to obtain a Fictitious Firm Name with the Mineral County Clerks' Office. Please contact the Mineral County Clerks' Office prior to completing this form to determine that you are in compliance with NRS 602. This application is a one-time \$20 fee. After confirmation of compliance with Mineral County Clerks' Office, have them sign the *Signature Sheet of Appropriate Offices*

Mineral County Clerk/Treasurer's Office  
105 S. A Street  
P.O. Box 1450  
Hawthorne, NV 89415  
(775) 945-2446

## Application of License

This form may need to be turned in to the Mineral County Clerks/Treasurers office. This form does not need to be turned in with your Mineral County Business License Application and has been provided for your convenience.

You may be required to obtain an Application of License with the Mineral County Clerks' Office. Please contact the Mineral County Clerks' Office prior to completing this form to determine that you are in compliance with NRS 364. This application is a one-time \$3 fee. Upon confirmation of compliance with Mineral County Clerks' Office, have them sign the *Signature Sheet of Appropriate Offices*

Mineral County Clerk/Treasurer's Office  
105 S. A Street  
P.O. Box 1450  
Hawthorne, NV 89415  
(775) 945-2446

IMPORTANT TELEPHONE NUMBERS AND ADDRESSES YOU MAY NEED TO START YOUR NEW BUSINESS OR CHANGE THE NATURE OF CURRENT BUSINESS ARE LOCATED ON THE NEVADA BUSINESS REGISTRATION FORM INSTRUCTIONS

Other telephone numbers you may need are:

- State of Nevada Department of Health – (775) 482-3997
- Mineral County Building Inspector (775) 945-3671
- Mineral County Fire Inspector (775) 945-2497

## Department of Taxation – Business Tax Certificate of Compliance

You must obtain a Retail Tax Permit and/or State Business License. We recommend you contact the Department of Taxation, prior to completing this form to determine that you are in compliance with Department of Taxation requirements. A Mineral County Business License application will not be accepted without a State Business License or Compliance Letter issued by the State.

## NEVADA BUSINESS REGISTRATION FORM INSTRUCTIONS

Completion of this form will provide the common information needed and/or required by participating state and local government agencies. Important details are included to help you provide the necessary information. It is important to respond to all items. Any omission could cause a delay in processing your registration.

**WHO ACCEPTS THIS FORM?** The Nevada Department of Taxation and the Nevada Employment Security Division (ESD). Also, most local governments accept the form.

**WHAT OTHER INFORMATION MUST I PROVIDE?** When applying to Department of Taxation: All businesses must complete a Supplemental Application (APP-01.01) to determine correct fees. When applying to Employment Security Division: If you employ agricultural or domestic workers, or are a non-profit agency you must complete a Supplemental Registration (NUCS-4058).

**WHO MAY USE THIS FORM?** Any person or corporation who is: opening a new business; opening additional locations; changing locations; changing owners, corporate officers or members; or changing a mailing address.

**WHERE IS THIS FORM AVAILABLE?** This form is available at the participating state and local agencies or by visiting the agency websites listed below. Forms may also be available at Chambers of Commerce and state and local economic development agencies.

### LINE-BY-LINE INSTRUCTIONS FOR COMPLETING THE NEVADA BUSINESS REGISTRATION - PLEASE COMPLETE IN ENGLISH.

1. **I Am Applying For:** Check the boxes that apply. Nevada has no central database for business registration. You are required to submit a copy to each agency that is applicable to your business. Keep a copy for your records.
2. **Check All Box(es) That Apply.**
3. **Business Entity Type:** Indicate the structure and type of ownership of your business.
4. **Corporate/Entity Name:** If incorporated, enter the name as registered with the Secretary of State. Include a telephone number.
5. **Federal Tax Identification Number:** Enter your Federal Tax Identification Number (FEIN). For information regarding a FEIN, contact the Internal Revenue Service at 1-800-829-1040. If you have applied for your number and have not received it, write "PENDING." If your FEIN changes, you must complete a new Nevada Business Registration.
6. **Corporate/Entity Address:** Enter the complete address of the corporation and the state of incorporation.
7. **Nevada Name (DBA):** Enter the name as it will be known to the public. Include a business telephone and fax number.
8. **E-mail Address and Website Address:** Enter your business e-mail and website addresses if appropriate.
9. **Mailing Address:** This address will be used to mail any licenses, reports, tax returns, and correspondence.
10. **Location(s) of Nevada Business Operations:** Enter the complete location of the business including suite numbers, apartment numbers, and street direction (N, S, E, and W). If there are additional locations in Nevada, please attach a list of all locations.
11. **Location of Business Records:** Enter the complete address where business records are maintained during normal working hours. Include the telephone number of this location, if different from the business telephone number.
12. **List All Owners, Partners, Corporate Officers, Managers, Members, etc.:** Include the full name, home address (street, city, state, and zip code), Social Security number, date of birth, title, percentage of business owned, and telephone number. If the business is incorporated, list all corporate officers. If the business is a partnership, list all partners. If the business is comprised of two corporations or other entities, list the officers/members/partners, etc. for each entity. Attach additional sheets if needed.
13. **Dates and Amounts Regarding Your Nevada Business:** Enter the date the business started or will start Nevada operations. If adding a location enter the date your additional location will begin Nevada operations. Enter the date the first worker was hired in Nevada. Enter the date and amount of the first Nevada payroll. If this is a new business, enter the estimated number of employees you will have. If the business is currently operating, list the number of employees on the payroll.
14. **Please Check All That Apply to Your Business:** If you check the box marked "Regulated by Federal/State Permit Number," attach a list that identifies the issuing entity and permit number.
15. **Nature of Your Business:** Describe your business activities, goods, products, or services in Nevada. State the approximate percentage of sales or revenues resulting from each item. Example: Retail sale of major appliances to public 60%; repair 40%.
16. **Acquired, Changed, or Have a New Federal Tax Number:** On the first line, enter the date the business was acquired; check the boxes that apply to how the business was acquired; and the portion of the business you acquired. On the second line, list the name of the previous owner and the business name of the previous owner. On the third line, indicate the physical address of the business you acquired. On the fourth line, list your previous Nevada Sales/Use Tax Permit Number and the Employment Security Division (ESD) Account Number of the previous owner. If there is more than one previous owner, attach an additional sheet.
17. **Signature Instructions:** Make copies first and then sign each copy. Original signatures are required by each state and local agency. Legal signatures include: sole proprietor-owner, corporate officer, and managing member.

Toll Free (In State) for All State of Nevada Agencies.....	800-992-0900
Nevada Department of Taxation:	Website: <a href="http://www.tax.state.nv.us">www.tax.state.nv.us</a>
Las Vegas.....	555 E. Washington Avenue, Suite 1300 • Las Vegas, Nevada 89101..... (702) 486-2300
Reno.....	4600 Kietzke Lane, Building L, Suite 235 • Reno, Nevada 89502..... (775) 688-1295
Carson City.....	1550 E. College Parkway, Suite 115 • Carson City, Nevada 89706..... (775) 684-2000
Nevada Employment Security Division (ESD):	Website: <a href="http://www.nvdetr.org">www.nvdetr.org</a>
Las Vegas.....	(702) 486-0250
Reno.....	(775) 688-2663
Statewide (Mailing).....	500 E. Third Street • Carson City, Nevada 89713-0030..... (775) 687-4545
If your business has or may have a discharge to the environment or needs a water appropriation permit, the following telephone numbers should be used for information concerning exemptions and to acquire applications:	
Nevada Department of Conservation and Natural Resources:	Website: <a href="http://www.dcnr.nv.gov">www.dcnr.nv.gov</a>
Environmental Protection Division .....	(775) 687-4670
Water Resources Division (Water Appropriation) .....	(775) 687-4380
Nevada Department of Wildlife: (Industrial Artificial Pond Permit) Website: <a href="http://www.ndow.org">www.ndow.org</a> .....	(775) 688-1500
Local Business License Departments: To obtain the telephone numbers for local license departments check the white pages of the telephone directory under the government name, i.e., Clark County, Reno.	

## NEVADA BUSINESS REGISTRATION

Important details are included in the instructions. Please type or print in black ink. Each agency may request additional information depending on your type of business. Completing this form does not relieve you of any statutory or regulatory requirements relating to your business.

<b>1</b>	I Am Applying For:	<input type="checkbox"/> Unemployment Insurance <small>(Employment Security Division - ESD)</small>	<input type="checkbox"/> State Business License, Sales/Use Tax Permit, Modified Business Tax <small>(Department of Taxation)</small>	<input type="checkbox"/> Local Business License	<b>SEND A COPY TO EACH AGENCY</b>							
<b>2</b>	<input type="checkbox"/> New Business	<input type="checkbox"/> Change in Ownership/ Business Entity	<input type="checkbox"/> Change in Location	<input type="checkbox"/> Change in Name	<input type="checkbox"/> Change in Corporate Officers	<input type="checkbox"/> Change in Mailing Address	<input type="checkbox"/> Other					
<b>3</b>	Business Entity Type:	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> S Corp.	<input type="checkbox"/> Publicly Traded Corp.	<input type="checkbox"/> Privately Held Corp.	<input type="checkbox"/> Association	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Government Entity	<input type="checkbox"/> Other	
<b>4</b>	Corporate/Entity Name:					Corporate/Entity Telephone ( )	<b>5</b>	Federal Tax Identification Number				
<b>6</b>	Corporate/Entity Address:	Street Number, Direction (N, S, E, W) and Name Suite, Unit or Apt #			City, State, and Zip Code +4		State of Incorporation or Formation					
<b>7</b>	Nevada Name (DBA):						Business Telephone ( )	Fax ( )				
<b>8</b>	E-mail Address:					Website Address:						
<b>9</b>	Mailing Address:	Street Number, Direction (N, S, E, W) and Name Suite, Unit or Apt #			City, State, and Zip Code +4							
<b>10</b>	Location(s) of Nevada Business Operations:	Street Number, Direction (N, S, E, W) and Name Suite, Unit or Apt #			City, State, and Zip Code +4							
<b>11</b>	Location of Business Records:	Street Number, Direction (N, S, E, W) and Name Suite, Unit or Apt #			City, State, and Zip Code +4		Telephone Number: ( )					
<b>12</b>	List All Owners, Partners, Corporate Officers, Managers, Members, etc. (If individual ownership, list only one owner.) Attach Additional Sheets if Needed.											
		Last, First, MI :			Residence Address (Street)			SSN:		Date of Birth		
		Title	Percent Owned	City, State, Zip +4			Residence Telephone					
		Last, First, MI :			Residence Address (Street)			SSN:		Date of Birth		
		Title	Percent Owned	City, State, Zip +4			Residence Telephone					
		Last, First, MI :			Residence Address (Street)			SSN:		Date of Birth		
		Title	Percent Owned	City, State, Zip +4			Residence Telephone					
		Responsible Local Contact ( Last, First, MI & Title ):			Residence Address (Street), City, State, Zip +4			SSN:		Residence Telephone		
<b>13</b>	Date Business Started in Nevada	Date Business Location Opened	Date First Worker Hired in Nevada	Date of First Nevada Payroll	Amount of First Nevada Payroll	Number of Employees						
<b>14</b>	<b>PLEASE CHECK ALL THAT APPLY TO YOUR BUSINESS</b>											
		<input type="checkbox"/> Mining	<input type="checkbox"/> Domestic	<input type="checkbox"/> Outside Dining	<input type="checkbox"/> Water Appropriation	<input type="checkbox"/> Adult Materials/Activity	<input type="checkbox"/> Amusement Machines	<input type="checkbox"/> Resident Agent				
		<input type="checkbox"/> Service	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Home Occupation	<input type="checkbox"/> Hazardous Material	<input type="checkbox"/> Leased or Leasing Employees	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Financial Institutions				
		<input type="checkbox"/> Tobacco	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Retail Sales—New	<input type="checkbox"/> Construction/Erection	<input type="checkbox"/> Leasing (Other than Employees)	<input type="checkbox"/> Gaming	<input type="checkbox"/> Mortgage Brokers				
		<input type="checkbox"/> Delivery	<input type="checkbox"/> Transportation	<input type="checkbox"/> Retail Sales—Used	<input type="checkbox"/> Telephone Solicitation	<input type="checkbox"/> Supply/Use Temporary Workers	<input type="checkbox"/> Health Services	<input type="checkbox"/> Banker				
		<input type="checkbox"/> Wholesale	<input type="checkbox"/> Not for Profit	<input type="checkbox"/> Live Entertainment	<input type="checkbox"/> Environmental Discharge	<input type="checkbox"/> Regulated by Federal/State Permit Number	<input type="checkbox"/> Other					
<b>15</b>	Describe in Detail the Nature of Your Business in Nevada. Include Product Sold, Labor Performed and/or Services Rendered. State the approximate percentage of sales or revenues resulting from each item. Example: Retail sale of major appliances to public 60%; repair 40%.											
<b>16</b>	If You Have Acquired A Nevada Business, Changed Ownership/Business Entity, or Have a New Federal Tax Number, Complete This Section:											
		Date Acquired/Changed:		Acquired/Changed by:			Portion Acquired/Changed:					
					<input type="checkbox"/> Purchase <input type="checkbox"/> Lease <input type="checkbox"/> Other				<input type="checkbox"/> In Whole <input type="checkbox"/> In Part			
		Name(s) of Previous Owner(s)				Previous Owner(s) Business Name						
		Address (Street)			City		State		Zip Code +4			
		Enter Your Previous Nevada Sales/Use Tax Permit Number, if applicable:				Enter Previous Owner(s) ESD Account Number:						
<b>17</b>	I CERTIFY THE INFORMATION PROVIDED IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. **Signatures must be original and that of a responsible party. If a general partnership or joint venture, more than one signature is required. Legal signatures include: sole proprietor-owner, corporate officer, and managing member.											
		**Signature Responsible Party / Original				Print Name And Title			Date			
		**Signature Responsible Party / Original				Print Name And Title			Date			

**MINERAL COUNTY SHERIFF'S OFFICE SUPPLEMENTAL FORM AND QUESTIONNAIRE**

P.O. Box 2290, 105 So. A Street, Suite #4 - Hawthorne, NV 89415  
 (775) 945-2434 phone - (775) 945-5484 fax - mcso@sbcglobal.net

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(PLEASE CHECK ONE)			
<input type="checkbox"/> Countywide	<input type="checkbox"/> Hawthorne	<input type="checkbox"/> Mina	
<input type="checkbox"/> Luning	<input type="checkbox"/> Walker Lake		

<b>FOR OFFICIAL USE ONLY</b>	
Date	_____
Receipt	_____
Fee	_____
Acct	_____

**>AFFIRMATION OF COMPLIANCE WITH MANDATORY INDUSTRIAL INSURANCE REQUIREMENTS (REFER TO NRS 244.33505 and 268.0955)**

(PLEASE CHECK ONE)

- The business named on this form has received workers compensation insurance coverage from the State Industrial Insurance System as required by the Nevada Industrial Insurance Act (NRS 616)
- Maintains a valid certification of self-insurance issued by the Nevada Insurance Commissioner pursuant to Nevada Industrial Insurance Act (NRS 616)
- The business named on this form is not subject to the provisions of the Nevada Industrial Insurance Act (NRS 616) due to a statutory exemption or as a business that has no employees nor hires any independent contractor or subcontractor.

**>CHILD SUPPORT INFORMATION (REFER TO NRS 244.33506)**

(PLEASE CHECK ONE) Corporations are exempt from completing this section

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with the plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or
- I am subject to a court order for the support of one or more children and am **NOT** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Social Security Number: \_\_\_\_\_

**>ACKNOWLEDGMENT**

The undersigned, being a duly authorized representative of the business named on this form, declares under penalty of perjury that all the information provided in the Mineral County Business Licenses is true and correct to the best of his/her knowledge.

\_\_\_\_\_  
Signature of Applicant

STATE OF NEVADA            )  
  )  
COUNTY OF MINERAL        )

SUBSCRIBED AND SWORN TO BEFORE ME BY

\_\_\_\_\_  
ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**MINERAL COUNTY SHERIFF'S OFFICE**

P.O. Box 2290, 105 So. A Street, Suite #4 - Hawthorne, NV 89415  
 (775) 945-2434 phone - (775) 945-5484 fax - mcso@sbcglobal.net

**SIGNATURE SHEET FOR APPROPRIATE OFFICES**

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ZONING CODE: \_\_\_\_\_

**➤ MINERAL COUNTY SHERIFF'S OFFICE**

I, Sheriff Edward Smith, have examined the foregoing application for a business license and find it to be properly prepared for submission to the Board of Mineral County Commissioners for final approval. (NRS 364)

\_\_\_\_\_  
 Sheriff Date

By Deputy:

**➤ MINERAL COUNTY CLERK/TREASURER OFFICE**

The aforementioned applicant is in compliance with the requirements of (NRS 602) Doing Business Under Assumed or Fictitious Name

\_\_\_\_\_  
 Clerk Date

By Deputy:

**➤ BUILDING and FIRE INSPECTIONS**

The aforementioned applicant is in compliance with all state and local building, and fire requirements.

\_\_\_\_\_  
 Building Inspector Date

\_\_\_\_\_  
 Fire Inspector Date

Comments and Recommendations:

**➤ FINAL APPROVAL BY BOARD OF COUNTY COMMISSIONERS**

\_\_\_\_\_  
 CHAIRMAN Date

\_\_\_\_\_  
 MEMBER Date

\_\_\_\_\_  
 MEMBER Date

Certificate of Business:

Fictitious Firm Name

THE UNDERSIGNED DO \_\_\_\_\_ hereby certify that \_\_\_\_\_

Conducting a \_\_\_\_\_ business at \_\_\_\_\_, Nevada.

Under the fictitious firm name of \_\_\_\_\_

And that said firm is composed of the following person \_\_\_ whose name \_\_\_ and address\_\_ (is) (are) as follows, to-wit:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WITNESS \_\_\_\_\_ hand \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF NEVADA                    )  
  ) ss.  
COUNTY OF MINERAL                )

On this \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_\_\_ before me,  
\_\_\_\_\_ a Notary Public in and for the  
said County and State, residing therein, duly commissioned and sworn, personally appeared \_\_\_\_\_

Known to me to be the person \_\_\_\_\_ whose name \_\_\_\_\_ subscribed to the within Instrument, and acknowledged to me that \_\_\_\_\_ he \_\_\_\_\_  
executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this Certificate first  
above written.

\_\_\_\_\_  
Notary Public in and for said County and State

APPLICATION FOR LICENSE

The undersigned, hereby applies to the \_\_\_\_\_ licensing authorities,

For the issuance to \_\_\_\_\_ of a license to engage in the \_\_\_\_\_ business. In connection therewith the undersigned presents the following affidavit.

AFFIDAVIT

STATE OF NEVADA )
) ss.
County of Mineral )

I.

\_\_\_\_\_, being first duly sworn, deposes and says that the undersigned is (is not) engaged in business under a fictitious name; that, if so engaged, the undersigned has complied with the provisions of that certain act, entitled, "An act requiring any person or persons transacting business in this state under fictitious name; or designation to file certificate thereof, and providing penalties for a violation hereof, and repealing all acts in conflict herewith," being 1929 N. C. L. section 4450 to 4459, inc.

II.

That there has been (has not been) a change in ownership in business of the undersigned, during the preceding calendar year; that such change, if there has been such change, was made in compliance with the provisions of that certain act entitled, "An act to regulate the purchase, sale, transfer, and encumbrance of a stock of goods, wares, and merchandise, otherwise than in the usual course of trade and prescribing penalties for the violation thereof," being an act commonly known as the Bulk Sales Act. Section 6818 to 6820 inc., 1929 N. C. L.

\_\_\_\_\_  
\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
County Clerk, Mineral County, State of Nevada

My term of office expires:  
\_\_\_\_\_

Section 364.110 and 364.120 Nevada Revised Statute.

"An act to regulate the issuance of licenses to engage in the business of selling merchandise at retail, and providing for the collection of a fee in connection therewith." Approved March 19, 1949. License authorities are authorized to collect a filing fee, not to exceed \$3.00.