



Planning Department
 155 N. Taylor St, Ste. 194, Fallon, Nevada 89406
 Off. 775-423-7627 // Fax 775-428-0259
 http://nv-churchillcounty.civicplus.com

General Application Form

**** This application is NOT a permit. **** **** Please print to be readable. ****
**** You will also need to attach the forms that are specific to your project. ****

BRIEF PROJECT DESCRIPTION: _____
 (I.E. - Speedy Mart expansion, Jones 4-lot land division, Riveredge Planned Development, etc.)

PERMIT INFORMATION

Zoning District(s): _____ Use Table Listing (CCC 16.08.250): _____ Review Req'd.: _____

List all Supplemental Application Forms needed for this project and attach them. (See Page 2 for assistance.)

PC HEARING (See submittal schedule for assistance.) N/A Desired Date: _____ Submittal Deadline: _____

APPLICANT INFORMATION

The person's signature below attests that they have reviewed the application materials and wish to pursue or allow the requested changes to the property. A govt. leaseholder attests that the requested changes are allowed within their approved lease. Persons signing below verify that the application information is true and accurate to the best of their knowledge. **NOTE: We cannot accept applications for projects that do not have a signature by the property owner, public lands manager, or govt. leaseholder, with limited exceptions.**

Legal Owner Org./Govt. Official Govt. leaseholder

Applicant (if not owner) Representative/2nd Owner/Other

Name (& title): _____

Name (& title): _____

Organization (if any): _____

Organization (if any): _____

Phone #s: () _____ () _____

Phone #s: () _____ () _____

E-mail: _____

E-mail: _____

Mailing Address: _____

Mailing Address: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

PROPERTY INFORMATION

Project Address(es): _____

Nearest Intersection: _____

Churchill County Parcel Numbers:

B. _____ // _____ acres.

A. _____ // _____ acres.

C. _____ // _____ acres.

Fronting Co. Road? NO YES

Fronting State Hwy? NO YES

Fronting TRACC Trail? NO YES

Sewer or Water Svc. Area? NO YES

Fronting Sewer/Water Line? NO YES

Well Protection Area? NO YES

NAS Fallon Overlay? NO YES

NAS Fallon Noise Area? NO YES

100-yr Floodplain? NO YES

(Ask staff or see Co. WebMaps for assistance with determining whether these special areas and their special rules apply)

(FOR STAFF USE ONLY - SEE PAGE 2)

DATE RCVD: _____

INITIALS: _____

FEE: \$ _____

ADDITIONAL APPLICATION FORMS WORKSHEET (not part of application form)

- Review all of the form criteria below. Even if you think you only need one permit, you may find that others are also needed.
- Consult the Zoning Use Table (CCC 16.08.250) to find your use and compare it to the zoning district your property is in. This determines if the use is allowed, and what permit or review is required. Ask staff if you need assistance.

- No Fee **Zoning Review:** Some projects need ONLY a Zoning Review. **However**, most other zoning permit reviews also require it.
Check the big box and the applicable small box if you will: Construct, expand, or replace a building
 Establish a new use or change an existing use. Construct, expand, or establish an outside use area
- Administrative SUP (\$50):** Check the big box and the applicable small box if you are establishing an:
 Accessory Dwelling Unit Additional Dwelling on a lot Other (use regular SUP form)
- Home Business Permit (HBP):** Check the big box and the applicable small box if you are establishing a home business
 Administrative review if meeting the basic code criteria (\$75) Special Use Permit if NOT meeting criteria (\$150)
- Special Use Permit:** Check the big box and applicable small box if your project requires a SUP (ask staff for assistance):
 General SUP - \$300 Major SUP - \$500 (such as power/industrial plant)
- Temporary Use Permit (\$100):** Check the big box and the applicable small box if you are placing a:
 Temporary Quarters for Hardship Reasons Temporary Quarters for Home Construction
 Temporary Quarters for Farm Labor Temporary Quarters for General Purposes
 Temporary Commercial Office (in Commercial Coach) Temporary Quarters for Commercial Watchman
- Variance:** Check the big box and the applicable small box if you are requesting to modify or vary a development standard:
 Admin. Variance - \$50 (less than 10% of a numerical standard) Variance (standard) - \$300 (all others)
-
- Transfer of Development Rights (\$150):** Check this box if you are applying to be a Sending Site.
- Abandonment:** Check the big box and the applicable small box if you are requesting to:
 Abandon Public Utility Easement (Admin.) - \$100 Abandon other easement/right of way (BOCC) - \$100
- Parcel Modification:** Check the big box and the applicable small box if you are requesting a:
 Certificate of Amendment (text error) - \$200 For Map of Amendment (map error) see Land Divisions
 Boundary Line Adjustment (Record of Survey) - \$750 Deed of Combination (Record of Survey) - \$750
 Commercial/Industrial Lot Creation (Record of Survey after subdivision approval) - \$750
- Land Divisions:** Check the big box and the applicable small box if you are requesting a:
 1st time Parcel Map (dividing land into 2-4 parcels) - \$1000 Second or subsequent Parcel Map - \$1000
 Division of Land into Large Parcels (any number of 40 acres or more) - \$750
 Map of Amendment (correcting point or line errors – uses original map process) - \$750
 Reversion to Acreage (merging lots created by a previous map – not by deed) - \$750
 Tentative Parceling Plan for a series of Parcel Maps - \$1500
 Cluster Development Plan for residential lots and Conservation Easements on agricultural land - \$1500
 Tentative Subdivision Review - \$1500 Improvement Plans Review – No Fee Final Subdivision Review - \$1250
- Planned Unit Development:** Check the big box and the applicable small box if you are developing a PUD:
 Concept Workshop - \$300 Concept Plan - \$300 PUD Permit - \$1000
- Amendments to Code or Master Plan:** Check the big box and the applicable small box if you are:
 Changing Zoning District Boundaries - \$300 Changing the text of the Development Code - \$100
 Changing the text or figures in a Plan - \$300 Establishing a Development Agreement – Sm-\$1000 / Lg-\$2000

TOTAL FEES



Planning Department

155 N. Taylor St., Ste. 194, Fallon, Nevada 89406

Off. 775-423-7627 // Fax 775-428-0259

<http://nv-churchillcounty.civicplus.com>

Supplemental Home Business Permit / SUP Application

**** This application is NOT a permit. ****

**** Please print to be readable. ****

**** You will also need to attach the forms that are specific to your project. ****

BRIEF PROJECT DESCRIPTION:

_____ (Use same description as on General Application)

SPECIAL USE PERMIT (Check this box if your home business needs a SUP)

FAQs ABOUT HOME BUSINESS PERMITS

Home Based Businesses (known as Home Occupations in some jurisdictions) are allowed in all zoning districts as shown in the zoning Use Table (CCC 16.08.250), although those in commercial and industrial zones are limited to existing residences. Such businesses are subject to two permitting options:

- **Home Business Permit (HBP)** for businesses that can meet a list of criteria (CCC 16.16.020.8.B.1) to ensure it will be compatible with the neighborhood. These can be approved over the counter by Planning Department staff.
- **Special Use Permit (SUP)** for businesses that exceed the HBP criteria, but meet the SUP criteria (CCC 16.16.020.8.B.1). These must be approved by the Planning Commission at a hearing, where neighbors get a notice.

Standard businesses are not normally allowed in residential areas because of compatibility problems. However, Home Based Businesses that meet the HBP Criteria should be nearly un-noticeable by outside parties and neighbors, should not change the residential character of the site, and consequently have little or no impacts to neighboring uses. They are considered "accessory" to the residence – meaning the residence is still the primary use, not the business. Because of this, almost any possible business can be acceptable and proposed as a Home-Based Business. In instances where a home business cannot meet all the criteria, it can still be approved through a SUP to allow it to exceed some of the criteria if it is still compatible with the residential character.

Submittal Package Items:

- General and supplemental application forms
- Fee Business License or application
- Sketch map showing the site and any outdoor components of the business

Name of business proposed: _____

Type of business proposed: _____

Describe the business in detail: _____

Criteria for approval through HBP (CCC 16.16.020.8(B)):

Initial each criteria to indicate you have reviewed it. If you are requesting a SUP for any of the criteria, check that box and provide the information about that item in your business description. *Please note* that the more SUP boxes are checked, the more difficult the approval becomes.

- ___ a. All owners shall reside in the residence. The only employees allowed to work on-site are family members residing in the residence. No other employees can report to the residence for work. In the case of contract work, they shall report directly to the job site and not the applicant's property.
- Home businesses that cannot meet the employee limit may request a SUP to allow a limited number of employees to work at the home site. Provide details in your description about (a) the number of employees, (b) why you need employees coming to the residence, and (c) the work to be done by them.
- ___ b. The appearance of the structure shall not be altered, no new structures built for the business, nor may business activities be conducted outdoors or in such a manner that would take away from the residential characteristics of the property beyond what is allowed in these conditions, i.e., one cannot have merchandise or services visible from outside the dwelling or generate excessive noise.
- Home businesses that wish to make exterior alterations may request a SUP to allow them. Provide details in your description about (a) the purpose of the changes, and (b) the activities to take place in the new areas.
- Home businesses that wish to have outdoor use areas for an equestrian, kennel, or lawn care business may request a SUP to allow them. Outdoor use areas are not allowed for other businesses, and those allowed cannot take away from the residential characteristics of the property. Provide details in your description about the location and purpose of the outdoor use areas.
- ___ c. The home-based business may involve the use of one commercial vehicle that is approved by the planning department, i.e., vans and medium sized trucks (only one semi-tractor and trailer for an over the road haul truck driver that may occasionally be at the residence).
- Home businesses that wish to increase the number or size of vehicles may request a SUP to allow them. Provide details in your description about (a) the number and type of vehicles, (b) why they are needed, and (c) how they will be stored.
- ___ d. Equipment that causes any type of interference in radios, televisions, or telephones, etc., or causes fluctuations in line voltage outside the dwelling unit is prohibited, i.e., excessive usage of power equipment.
- NOTE: Home businesses may NOT** exceed this criteria through a SUP.
- ___ e. Outside storage of construction or raw materials is not allowed. One cannot store any toxic or hazardous materials at a quantity that requires a permit from the State of Nevada or any other agency charged with the regulation of hazardous materials. Inventories of drugs, alcohol, fireworks, or explosives (excluding ammunition) are not allowed. Storage of business vehicles must meet the vehicle condition. No outside storage of construction or other similar equipment is allowed with the exception that one piece of equipment (such as a trailer) may be allowed with the approval of the planning department; lawn care and other similar equipment may be allowed with approval of the planning department, but not to exceed a quantity that can be hauled and stored on a single pickup and trailer.
- Home businesses that wish to have outside storage of business-related materials and equipment may request a SUP to allow them if they are less than ¼ acres and enclosed by buildings or screened fencing. Provide details in your description about (a) the location and area of the storage, (b) what will be stored and why it is needed, and (c) how will the area be screened.
- ___ f. No signs may be placed on the property to advertise the home-based business. One may advertise one's business through public media, business cards, stationery, etc.
- Home businesses that wish to have a business sign may request a SUP to allow a sign up to 10 square feet. Provide details in your description about (a) where the sign will be, (b) what will be on the sign, and (c) the sign's dimensions. Drawings that show this may substitute for text descriptions.

___ g. No customer traffic is permissible. Home deliveries, such as UPS, FedEx, etc., in a quantity/frequency that will not be detrimental to the surrounding neighborhood may be permitted.

Home businesses that wish to have customer visits may request a SUP to allow them. Provide details in your description about (a) the expected numbers, and (b) expected hours of visits to the residence.

___ h. If the applicant is not the property owner, the property owner must authorize the use of the property for the proposed home-based business in writing.

NOTE: Home businesses may NOT waive this criteria through a SUP.

(Affidavit needed for SUP only)

APPLICANT AFFIDAVIT

_____, being duly sworn, deposes and states that:

- 1) I/we either own the property described in the foregoing application, or have permission of the property owner which has been provided with the application;
- 2) The statements and answers herein contained, and the information herewith submitted are in all respects complete, true and correct to the best of my/our knowledge and belief;
- 3) That the zoning ordinances for a special use permit have been read, understood and complied with.
- 4) That no assurance or guarantee can be given by members of Planning Commission or Planning Department.
- 5) That any material misrepresentation or omission made in the application or at a public hearing by the applicant or an agent of the applicant may constitute grounds for reexamination or revocation of the special use permit if granted.
- 6) I/we will be responsible for all recording fees related to this application.

Applicant's Signature

State of Nevada)
): ss.
County of _____)

Signed and sworn to (or affirmed) before me on _____(date) by
_____(name(s) of person(s) making statement).

Signature of notarial officer

Permit is:	APPROVED / REQUIRES SUP
Issue Date:	_____ Expiration Date: _____
Authorized By (print):	_____
Signature:	_____
Comments / Conditions:	_____



Churchill County
Public Works,
Planning & Zoning

Public Works
Planning Commission
Planning Department
Zoning Enforcement
Business License Dept.
GIS

Dear Business Owner:

In order to complete an application for a business license you will need to show proof of compliance with state regulations for doing business in the State of Nevada and in your industry. Please start by logging onto the Nevada Business Portal, called *SilverFlume*, at www.nvsilverflume.gov and complete your Common Business Registration (CBR). This form may be used by partners with the state portal to gather information needed for applications for many different state agencies regulating your business.

Since the business portal is new, not all state agencies are partnered with them at this time. It is your responsibility to ensure that your business is registered for the permits and licenses you need for your industry type and your local jurisdiction. If you have any question what these might include, you may contact our department at 775-423-7627 for more information.

The next page is a checklist to help you make sure that you complete all of the requirements for obtaining a business license. Please provide either a copy of the receipt where you applied or the actual permit or license for each of the items that pertain to your type of business along with your business license application to Churchill County.

You must also comply with land use zoning for business locations within Churchill County. Please contact the Churchill County Public Works, Planning & Zoning Department with your proposed business location to check that the property is zoned appropriately or if any use permits may be required in that location.

Attached is the packet for a Churchill County Business License. **Our license fees are: \$125.00 annually (based upon calendar quarters) or \$50.00 quarterly, your choice.** Please make the check payable to: Churchill County.

We look forward to assisting you to get you licensed to do business in Churchill County. Please note that the state business license does not take the place of any license or regulations of the local jurisdiction, and that Churchill County and the City of Fallon are separate jurisdictions with their own licensing regulations. If I can be of any further assistance, please don't hesitate to contact me.

Thank you,

Business Licensing

155 North Taylor Street, Suite 194 ♦ Fallon, NV 89406 ♦ Phone (775)423-7627 ♦ Fax (775)428-0259
Churchill County is an equal opportunity employer and provider.

State Requirements Checklist

- Common Business Registration** on *SilverFlume* portal, www.nvsilverflume.gov. A copy of this may be substituted for the application in the Business License Application.
- Entity Registration** (if applicable) on SilverFlume portal. Your INC, LLC, LTD, etc. must be registered in order to link all other documentation to it. For more information contact Nevada Secretary of State, 800-450-8594.
- State Business Registration** on *SilverFlume* portal. Please be sure to read all questions as there are exemptions that may apply. For more information contact Nevada Secretary of State, 800-450-8594.
- Worker's Compensation Declaration (D-25)** on *SilverFlume* portal. The declaration form is also provided in the Business License Application. You are subject to Nevada State Labor Laws and must provide Worker's Compensation coverage for employees.
- Taxation Registration** on SilverFlume portal. For more information contact Nevada Department of Taxation, 866-962-3707, www.nevadatax.nv.gov.
- Certificate of Fictitious Name** (if applicable) must be filed with the Clerk of each county in which you conduct business per NRS 602 for all businesses operating under a name that is in any way different from the name(s) of the owner(s) or the name of the entity registered with the Secretary of State. The form is provided in the Business License Application. Filing fee applies.
- Certificate of Profession** (where applies) must be provided to show compliance with the regulating agency for your business industry, including, but not limited to, Real Estate Broker/Agent, Massage Therapist, Insurance Agent, Contractor's License, Child Care, Practitioner, Liquor distribution/importation, Gaming, DMV registration/license, Locksmith/Safe Mechanic, etc.
- State Health Permit** is required for all businesses handling food, beverages, or cosmetics and must be obtained from the Nevada Bureau of Health Protection Services, 775-423-2281 or 775-687-7533. A permit from any other health district is not valid in Churchill County.

The following are some local requirements in addition to those listed above:

- Business License for the business location serving Churchill County.** In order to be able to license a business from a location outside our jurisdiction you need to provide proof that you are licensed to conduct business from that location if a business license is required.
- Liquor/Gaming/Peddler Permit** from Churchill County Sheriff for these business activities. You may contact the Sheriff's office at 775-423-8083 and the applications are available on the Applications page of our website.

Please submit proof of compliance for those listed above that apply to your operation along with your Business License Application to the Churchill County Planning Department. There may be other affidavits that apply to your business operation, so please contact us at 775-423-7627 to discuss your business activities.

CHURCHILL COUNTY BUSINESS LICENSE APPLICATION

BUSINESS LICENSE FEE: \$125 for a year based upon calendar quarters OR \$50 for each calendar quarter

Applicant's Name: _____ Date of Application: _____

Business Name: _____ Business Phone No.: _____

Business Address: _____

Mailing Address: _____

Type of Business: _____

Please provide documentation of the following:

--Proof of registration through Nevada Secretary of State for state licensing (& active entity, if applies)

NV Business ID# _____

--Proof of any licenses and/or permits required by Federal or State law for your business industry

--Certificate of Fictitious Name, if business will be operating under an assumed name (per NRS 602)

--Proof of workers' compensation compliance

--Proof of registration with Nevada Department of Taxation (Sales/Consumer Use Tax)

NV Tax ID# _____

--If office is based outside of Churchill County, provide a copy of the business license issued by the licensing jurisdiction where the office is located

For business located in Churchill County only:

- Are you planning on putting up a sign? _____ If **yes**, please check with the Planning Department and the Building Department for sign requirements and permits.

Parcel No.: _____ Zoning: _____ Use Permit Required? _____

- You need to have Churchill County's Building and Fire Departments sign off.

C.C. Building Dept.: _____ Date: _____

Churchill County Building Department: 155 N. Taylor, Suite 170, Fallon. Office: (775) 428-0264

C.C. Fire Dept.: _____ Date: _____

Mitch Young phone: (775) 423-0665 reinspection required prior to opening

I declare under penalty of perjury that the aforementioned information and attached documentation is true, correct and current.

SIGNATURE OF APPLICANT

DATE

DEPARTMENT USE ONLY

Business License Fee: _____ Use Permit Fee: _____ Amount Paid: _____

Effective Date: _____ Permit Type: HB, MSUP, Non-Profit, Ag, NONE

B/L Account #: _____ Permit #: _____

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There will be a \$25.00 filing fee

Please make checks payable to:
Churchill County Clerk/Treasurer
155 N. Taylor St., Suite 110
Fallon, NV 89406

5.00.22 Filing Certificates of Fictitious Business Name

- A. Requirement of Filing Certificate: Every person doing business in this county under an assumed name, that is in any way different from the legal name of each person who owns an interest in the business, or in the case of an artificial person, its name as it appears in the records of the secretary of state, must file a certificate containing the information required by Nevada Revised Statutes 602.020 with the county clerk. Except for subsection B of this section, providing for the term of the certificate and renewal certificate, chapter 602 of Nevada Revised Statutes applies to all other aspects of the certificate.
- B. Term of Certificate and Renewal Certificate:
1. A certificate filed with the clerk expires five (5) years after the date it is filed or within one (1) year of the effective date hereof, whichever is later. The certificate must contain the statement that it expires after five (5) years.
 2. On or before the expiration of a certificate or a renewal, the person doing business in the county under an assumed or fictitious name must file a renewal certificate containing the information in Nevada Revised Statutes 602.020 with the county clerk. The renewal certificate must contain a statement that it expires after five (5) years.
 3. A renewal certificate filed with the clerk expires five (5) years after the date it is filed.
 4. The county clerk will cause notice to be published in a newspaper of general circulation in the county that persons who have filed certificates pursuant to Nevada Revised Statutes 602.020 for doing business under an assumed or fictitious name must renew the certificate within five (5) years after it was filed or within one year of the effective date hereof, whichever is later. (Bill 2002-D, 2002)

NRS 602.010 Filing of certificate with county clerk.

1. Every person doing business in this state under an assumed or fictitious name that is in any way different from the legal name of each person who owns an interest in the business must file with the county clerk of each county in which the business is being conducted a certificate containing the information required by [NRS 602.020](#).
2. A person intending to conduct a business under an assumed or fictitious name may, before initiating the conduct of the business, file a certificate with the county clerk of each county in which the business is intended to be conducted.

CERTIFICATE OF FICTITIOUS BUSINESS NAME

****THIS CERTIFICATE EXPIRES 5 YEARS FROM FILE DATE****

NEW RENEWAL OR REPLACE EXISTING

(PRIOR RELATED FILING NUMBER)

STATE OF NEVADA)
) ss.
COUNTY OF CHURCHILL)

I / We hereby certify that I / We are conducting a _____
business in the City of Fallon and / or the County of Churchill, State of Nevada, under a designation not showing the name(s)
of the person(s) interested in conducting or carrying on said business in the City of Fallon and/or the County of Churchill,
State of Nevada, under the designation not showing the name(s) of the person(s) interested in carrying on such business
under the fictitious name of:

(FICTITIOUS BUSINESS NAME)

(BUSINESS STREET ADDRESS)

(BUSINESS PHONE/EMAIL)

The name(s) of the person(s) interested in or carrying on such business:

(1) _____
(NAME OF INTERESTED PARTY - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(3) _____
(NAME OF INTERESTED PARTY - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(2) _____
(NAME OF INTERESTED PARTY - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(4) _____
(NAME OF INTERESTED PARTY - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

SIGNATURE OF: OWNER, PARTNER OR AUTHORIZED OFFICER AND TITLE

(1) _____
(2) _____

(3) _____
(4) _____

STATE OF NEVADA)
) ss.
COUNTY OF CHURCHILL)

On this _____ day of _____, 20____, before me personally appeared _____

known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged to me that _____ executed
the same freely and voluntarily, and for the uses and purposes therein stated.

In witness whereof I have hereunto set my hand and affixed my official seal this _____ day of _____ 20____.

Notary Public/Deputy County Clerk
Churchill County, Nevada

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	
Business Address	City	State	Zip Code
Federal Identification No.	Social Security No.	Contractor's Board License No.	
Name of Principal Owner (Please Print)		Principal Owner's Telephone No.	
Principal Owner's Address	City	State	Zip Code

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
-----------------------------------	-----------------------

() 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
-----------------------	---------------------------

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 No.
Applicant's Residence Address	City State Zip Code

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
--	--------------------------

Witness Signature - (Business License Office Employee)	Name of City or County
---	-------------------------------

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 patrolman; 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.

A Type of Business@ means the nature of 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.

Business License Fee Waiver Affidavit

Churchill County Code 5.04.090.H

The Churchill County Code allows the **commercial business license fee (\$125/year)** to be waived if I have acquired a special use permit or home business permit for a home-based business from the Churchill County Planning Commission or Public Works, Planning & Zoning Department and I meet the following criteria:

1. I am a sole proprietor, or family group consisting of no more than two (2) family members within second degree of consanguinity and residing at the same residence,
2. I have no employees or contract employees or subcontractors,
3. I have no customer traffic to my home, and
4. I have no signs.

Definition of “employees or contract employees or subcontractors” includes the following:

- Regular employee(s) requiring you to carry worker’s compensation insurance;
- Employees hired through a temporary employment agency for part-time or job-related work; and
- Contracted employees or subcontractors hired in order to perform part of your job that has not obtained a Churchill County business license.

If you do not have employees or contract employees or subcontractors, it is understood that you work alone or with the assistance of ONLY your immediate family members or partners.

If I DO meet the above listed criteria, I understand that I will only be charged the application fee for the land use permit initially OR the renewal fee for a home business permit as established by resolution of the board of county commissioners for my renewal.

If I DO NOT meet the criteria to waive the commercial business license fee, then I will pay the business license fee in addition to any fee for the land use permit application/renewal.

I attest that all of the statements above are true and correct under penalty of perjury. It is my responsibility to notify the Business License Administrator at the Churchill County Public Works, Planning & Zoning Department as soon as possible regarding any changes to the status of my eligibility to have the commercial business license fee waived. I realize that if I state that I do not have employees in order to have the business license fee waived and violate this agreement, I will be subject to payment of the business license fee, and possible fines and fees administered by the Code Compliance Official. A copy of this form will be placed in my business license file.

Business Name

Signature

Date