Thank you for your interest in business licensing with the City of Wells, Nevada. According to Section 3-1-1, it shall be unlawful for any person to engage in or carry on any business, trade, or profession within the City without first procuring the license required for it. Complete Business Licensing Regulations and related information are available upon request.

Below is a checklist to assist you with the licensing process and other agency addresses, phone numbers and web sites that may be helpful. Also attached are forms that need to be returned to the City of Wells prior to issuance of a business license.

	_City License Application (Enclosed in the				
	City License Information Sheet (Enclosed in this packet)Child Support Information Sheet (Enclosed in this packet)				
	_Cind Support Information Sheet (Elici	osed in this packet)			
_	_Copy of Nevada Sales/Use Tax Permit,		earance Letter		
	Contact Nevada Department of Taxat				
	4600 Kietzke Lane, Building I	2, Suite 235			
	Reno, Nevada 89502 (775) 687-9999	tax.nv.gov			
	(113) 661 3223	turin 1.501			
	_Copy of Nevada State Business License				
	_Copy of Organization Papers: Incorpor	ration, Partnership, LL	C (as applicable)		
	Contact Nevada Secretary of State	2			
	101 North Carson Street, Suite	e 3			
	Carson City, Nevada 89701 (775)684-5708	nvsos.gov			
	(113)004-3100	114303.604			
	_Copy of Fictitious Firm Name Filing (if	applicable)			
	Contact Elko County Clerk				
	Elko County Courthouse, 3 rd F	Floor			
	550 Court Street				
	Elko, Nevada 89801	alkocountyny nat			
	(775)753-4600	elkocountynv.net			
	_Copy of Industrial Insurance Certificat	te			
	Contact private insurance agent				
	Contact Nevada Division of Industrial		rements		
	Worker's Compensation Section				
	(775)684-7270	dirweb.state.nv.us			
	_Copy of all State Licenses (Contractors,	Cosmetology, Gaming)			
	Certificate of Health Approval (if applic	rable)			
	Contact for health inspection of cafes				
	Bureau of Health Protection S				
	1020 Ruby Vista Drive, Suite	103			
	Elko, Nevada 89803				
	(775)753-1138	Fax (775) 753-1140	health.nv.gov		

Certificate of Building Occupancy

City of Wells Annual Business License Fee Schedule

Please remit with license application for each license required. More than one license may be required.

BUSINESS CLASSIFICATIONS	FEES PER YEAR				
AMUSEMENTS AND ENTERTAINMENTS Theater, Movie Complex, Motion Pictures					
Whose monthly gross sales do not exceed \$1,000 Whose monthly gross sales exceed \$1,000	\$ 35.00 \$ 45.00				
Fortune Teller, Clairvoyant, Palmist, Medium, Psychic	\$ 100.00				
APARTMENTS					
Less than thirty (30) units	\$ 60.00				
More than thirty (30) units	\$ 60.00 plus				
Per unit in excess of thirty (30) units	\$ 2.00				
BANKING	\$ 45.00				
(Examples: Banks, credit unions, other lending institutions)					
BROTHEL	\$1,000.00				
COIN OPERATED MACHINES					
(Examples: Musical coin machines, non-gaming machines, merch	andise vending machines, food vending				
machines, laundry machines)	\$ 12.00				
Per machine	\$ 12.00				
CONTRACTOR					
(Examples: Building, Electrical, Plumbing, Roofing, Sign, Excava	ation, Fencing, Mobile Home Setup)				
	\$ 35.00				
Handyman (Per Nevada Revised Statute)	\$ 35.00				
Concrete/Redi-Mix Sales and Delivery	\$ 35.00				
COSMETOLOGY					
Beauty Shop/Barber Shop (Not to exceed two chairs)	\$ 35.00				
For each additional chair	\$ 10.00				
Nail Salon (Not to exceed two chairs)	\$ 35.00				
For each additional chair	\$ 10.00				
Tanning Salon (Not to exceed two beds/booths)	\$ 35.00				
For each additional bed/booth	\$ 10.00				
EXPLORATION (OIL, MINING)	\$ 35.00				
EXPRESS/FREIGHT COMPANIES	\$ 60.00				
(Any company having an office, depot, station or agency within the who is engaged in the business or occupation of receiving express	e limits of the City of Wells or				
within the City of Wells except an agent or agency of the United S	States)				

HEALTH CLUB/GYMNASIUM/FITNESS CENTER \$ 35.00

(Examples: UPS, Fed-Ex, Motor Carrier)

HOME BUSINESS

All Home Businesses shall pay the license fee for appropriate category.

HOTELS, MOTELS, INNS,	BOARDING HOUSES.	BED	& BREAKFAST
-----------------------	-------------------------	-----	-------------

Less than thirty (30) rooms	\$ 60.00
More than thirty (30) rooms	\$ 60.00 plus
Per unit in excess of thirty (30) rooms	\$ 2.00

INSURANCE AGENT

\$ 35.00

(Surety, life, fire, accident, health)

LAUNDRY

Whose monthly gross receipts do not exceed \$1,000 \$ 35.00 Whose monthly gross sales exceed \$1,000 \$ 45.00

(Any person who shall take laundry work to their homes or go to the homes of patrons to do laundry work shall not be required to pay for such license.)

MOBILE HOME PARK

Less than thirty (30) spaces	\$ 60.00
More than thirty (30) spaces	\$ 60.00 plus
Per unit in excess of thirty (30) spaces	\$ 2.00

PRINTING OFFICE/NEWSPAPER OFFICE

Whose monthly gross receipts do not exceed \$1,000 \$ 35.00 Whose monthly gross sales exceed \$1,000 \$ 45.00

PROFESSIONAL

\$ 35.00

(Examples: Doctor, Chiropractor, Dentist, Pharmacist, Veterinarian, Accountant, Attorney, Architect, Engineer, Surveyor, Plan Reviewer)

REAL ESTATE

(Every real estate agent located within the City of Wells or who solicits in the City of Wells)

Monthly gross commission does not exceed \$1,000	\$ 35.00
Is between \$1,001 & \$5,000	\$ 45.00
Is in excess of \$5,000	\$ 60.00

RENTALS

Office/Property Rental Space (more than 2 units)	\$ 35.00
Storage Sheds/Mobile Storage	\$ 35.00

REPAIR GARAGE (AUTO, EQUIPMENT)

Repair Garage	\$ 35.00
Gas/Diesel Fuel Station	\$ 35.00
Combination Repair Garage/Gas or Diesel Station	\$ 35.00
Auto Salvage/Dismantling	\$ 35.00
Mobile Repair Service	\$ 35.00
Car Rental Business	\$ 35.00
Towing Business	\$ 35.00
Car Wash/Truck Wash	\$ 35.00
Small Engine Repair Shop	\$ 35.00

RECREATIONAL VEHICLE PARK

Less than thirty (30) spaces	\$ 60.00
More than thirty (30) spaces	\$ 60.00 plus
Per unit in excess of thirty (30) spaces	\$ 2.00

RESTAURANTS, CAFES, DRIVE-INS, SHORT ORDER COUNTERS, MOBILE FOOD VENDORS, SEMI-PERMANENT CAFES

\$ 35.00

(Examples: Taco Wagon, Snow Cone Hut, Ice Cream Truck, Java Hut)

RETAIL	R	E	T	A	II	[]
--------	---	---	---	---	----	----

RETAIL		
(Selling goods, wares or merchandise including book /party sales,		
Average monthly sales of less than \$3,000		35.00
\$3,001 to \$5,000		45.00
\$5,001 to \$10,000	- 1	60.00
\$10,001 to \$20,000		86.00
\$20,001 or more	\$1	20.00
RETAIL SALES AND SERVICE		
Appliance Sales and Service	\$	35.00
CB Radio Sales and Service	- 1	35.00
Computer Sales and Service	- 50	35.00
Office Equipment Sales and Repair/Service		35.00
Gun Sales & Repair	12	35.00
Mobile Vehicle Glass Sales and Installation		35.00
Photography/Portrait Studio and Sales		35.00
Security System Sales and Service		35.00
Security bystem bales and between	Ψ	33.00
SCHOOL	g	
Dance School		35.00
Martial Arts School		35.00
Preschool		35.00
Private Tutoring	\$	35.00
SERVICE		
Carpet Installation	\$	35.00
Carpet Cleaning Service	\$	35.00
Childcare Service	\$	35.00
Computer Service/Technician	\$	35.00
Fire Extinguisher Service	\$	35.00
Furnace Cleaning	\$	35.00
Housekeeping/Janitorial Service	\$	35.00
Landscaping/Lawn Care/Tree Trimming Service/		
Sprinkler Installation	\$	35.00
Locksmith		35.00
Massage Therapy Service	200	35.00
Pet Grooming/Setting/Walking		35.00
Private Courier		35.00
Rental Service		35.00
(Tables & chairs, vehicles or equipment, small machines)	2.5.0	

Taxidermy Tatoo Parlor	\$ 35.00 \$ 35.00
TRANSIENT ITINERANT MERCHANTS AND VENDORS (Less than four times per year) Carnivals, Street Shows, Circus	\$100.00 per day \$100.00 per day
TRANSPORTATION (Every person/company engaged in the transportation of passengers) (Examples: Taxicab service, bus company)	\$ 35.00
TRUCKING	\$ 35.00
Electrical Power Internet Providers Recycling/Sanitation Service Telephone Television Transmission	\$200.00 \$120.00 \$120.00 \$120.00 \$160.00

(Those engaged in carrying on, maintaining, pursuing, conducting or transaction by making wholesale deliveries from trucks, conveyances or vehicles, **and** who does not have a retail business license)

(Examples: Food, ice, consumable paper products, welding, propane)

ALL OTHER CLASSIFICATIONS

WHOLESALE DELIVERY

\$ 35.00

\$ 35.00

City licenses run on a fiscal year; beginning July 1 each year and expiring on June 30 of the following year. Your first license will expire June 30 and the City does not prorate licenses. All licenses are

non-transferable. Return all forms with original signatures to the address below. For more information contact:

City of Wells
P.O. Box 366, 525 Sixth Street
Wells, NV 89835-0366
Phone (775) 752-3355 Fax (775) 752-3419
wellscityhall@cityofwellsnv.com

APPLICATION FOR LICENSE

City Clerk or Notary Public

CITY OF WELLS P.O. BOX 366 525 SIXTH STREET WELLS, NEVADA 89835-0366 (775) 752-3355 Fax (775) 752-3419 wellscityhall@cityofwellsnv.com

Please provide the following information for our business license files.

LICENSE REQUIRED (List all that apply; Example: Café, Merchandise, Service Station, Contractor)
BUSINESS NAME (or dba)
BUSINESS LOCATION
MAILING ADDRESS
CITY, STATE & ZIP
BUSINESS PHONE
E-MAIL ADDRESS
OWNER NAME (Company, LLC)
CHIEF CORPORATE OFFICER (President, CEO)
OWNER ADDRESS
OWNER CITY, STATE & ZIP
OWNER PHONE
MANAGER NAME
NEVADA SALES TAX NUMBER
NEVADA STATE BUSINESS LICENSE NUMBER
NEVADA CONTRACTOR'S NUMBER
MONTHLY SALES VOLUME \$ NUMBER OF EMPLOYEES
MACHINES: COIN OP SLOTS VENDING VIDEO
NEVADA STATE INDUSTRIAL INSURANCE ACCT. NO
OTHER INFORMATION
AUTHORIZED SIGNATURE

CHILD SUPPORT INFORMATION

Federal Welfare Reform as implemented by the 1997 Session of the Legislature by Senate Bill 356 requires that professional and occupational licensing agencies add certain questions regarding child support to all applications for new licenses and for renewals.

Please mark the appropriate response. If denial of the application.	Failure to mark one of the three will result in		
I am not subject to a court of	order for the support of a child.		
and am in compliance with approved by the district atte	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 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; or		
and am not in compliance v	er for the support of one or more children with the order or a plan approved by the ablic agency enforcing the order for the wed pursuant to the order.		
	Signature of Applicant		
	Date		