



OFF- HIGHWAY VEHICLE (OHV) INFORMATION

“Off-highway vehicle dealer” means any person who, for compensation, money or other thing of value sells, exchanges, buys, offers or displays for sale, negotiates or attempts to negotiate a sale or exchange of an interest in an off-highway vehicle; or is engaged wholly or in part in the business of selling, buying, or taking in trade off-highway vehicles. **NRS 490.061.**

LICENSING REQUIREMENTS

1. Application for Business License (OBL237) completed in full and signed by a principal of the business.
2. Personal History Questionnaire (OBL242) must be completed by each principal of the business listed on the license application unless it has been less than one year since the principal last filed a PHQ with the Department.
3. Applicant photograph, which must be in color, at least 2" x 2" (passport photo size) and show full face, shoulders and above.
4. One set of fingerprints for each principal of the business. Applicants must be fingerprinted by an authorized DMV representative or a law enforcement agency. An applicant who has met the fingerprint requirement pursuant **NRS 482.3163, NRS 482.325, NRS 482.333, NRS 482.362** is not required to submit additional fingerprints.
5. DPS Fingerprint Background Waiver (OBL256) completed and signed by each applicant submitting a set of fingerprints.
6. A surety bond (OBL210) or deposit in lieu of bond in the amount of \$50,000. Motor vehicle dealers who have met the bonding requirements pursuant to NRS 482.345 are not required to secure an additional bond for their OHV license. The existing surety bond must be \$50,000 or greater and a surety rider must be submitted indicating the undertaking of OHV licensing activities pursuant to **NRS 490.**
7. Insurance Certificate. NRS 490.210
8. City or county business license.
9. Nevada Secretary of State Business License Number
10. Copy of Certificate of Incorporation and Corporate filing with names of the officers filed with the Nevada Secretary of State's Office, if applicable.
11. An established place of business within the state, with a permanent enclosed building large enough to accommodate an office. The established place of business must also have boundaries, which are clearly marked.
12. A permanently affixed display sign with the name of the business in lettering eight inches high, formed by lines that are at least one inch wide. The sign must be clearly legible from the center of the nearest street or roadway.
13. Two color photographs that clearly show the exterior of the business to include the display sign.
14. A site inspection conducted by the Department.
15. **New OHV Dealers:** Dealer Franchise Certification (OBL253) from manufacturers or distributors, authorizing sale of designated OHV makes.
16. **Manufacturers:** Letter of confirmation from SAE Strategic Alliance notifying the applicant of their World Manufacture Identifier (WMI) assignment. Contact SAE at www.sae.org or douds@sae.org or 724 772-8511.

Business licenses expire on December 31 of each year. The fee for licenses issued throughout the year is the same; there is no prorating of fees.

FEES

Non-refundable application fees.

Original License application fee: \$125

Fingerprint fee: \$40.00 for each principal submitting fingerprints to be process.

Late Fees: A license that expires for failure to renew may be reinstated upon submission of a completed renewal application, renewal fee, and a \$25.00 late fee.



OHV REQUIREMENTS FOR NEW SALESPERSON

1. Certificate of Employment (OBL236) completed and signed by a principal or authorized person of a licensed Nevada OHV Dealer.
2. Personal History Questionnaire (OBL242) completed by applicant.
3. Applicant photograph, which must be in color, at least 2" x 2" (passport photo size) and show full face, shoulders and above.
4. One set of fingerprints. Applicant must be fingerprinted by an authorized DMV representative or law enforcement agency. Some agencies may charge for fingerprinting. Check with your local agency.
5. DPS Fingerprint Background Waiver (OBL256) completed and signed by each applicant.
6. Occupational License (Salesperson) Disclaimer (OBL264). Disclaimer must be notarized or signature witnessed by an authorized DMV representative.

Application fees (Non-refundable)

Original License Fee \$75.00
Fingerprinting Fee \$40.00
Annual Renewal Fee \$40.00
Transfer Fee \$20.00

OHV REQUIREMENTS FOR EXISTING SALESPERSON

1. Certificate of Employment (OBL236) completed and signed by a principal or authorized person of a licensed Nevada OHV Dealer; required to add an OHV license to an existing Salesperson License or to transfer an existing Salesperson License to a new business.
2. Transfer fee of \$21.00 - only applies to existing salespersons transferring their Salesperson License to a new business.

Occupational salesperson licenses expire on December 31 of each year. The fee for licenses issued throughout the year is the same; there is no prorating of fees. If your license has been expired for 6 months or more, you must submit a new application and pay the original license fee.



Clear Form

APPLICATION FOR BUSINESS LICENSE AND GARAGE REGISTRATION

State Business License Number _____ DMV License Number _____
(If new applicant, please leave blank)

Individual/Corporate Name _____

DBA Name _____

Mailing Address _____
Street City State Zip Code

Physical Address _____
Street City State Zip Code

Business Phone Number _____ Business Fax Number _____

E-Mail Address _____ FEIN: _____

Reason for Submittal	Business Type	Dealer (Business Activity)	Schools (Business Activity)
☐ New Application ☐ Principal Location ☐ Branch Location ☐ Change Mark type of change(s) ☐ Add Activity ☐ Remove Activity ☐ Change of Principal(s) ☐ Adding ☐ Deleting ☐ Change of Business Structure ☐ Change of Business Address ☐ Mailing ☐ Physical ☐ Change of Curriculum ☐ Change of Class Schedule ☐ Change of Email Address ☐ Change of Business Name _____ Requested Name _____ Previous Name ☐ Duplicate License	☐ Rebuilder ☐ Manufacturer ☐ Distributor ☐ Transporter ☐ Broker ☐ Wrecker ☐ Electronic Notification ☐ Salvage Pool ☐ Consignment Auction ☐ Live ☐ Internet ☐ Body Shop ☐ Class A Certificate Garage Registration ☐ Garage Number of Technicians _____ Type of Repairs _____ _____	☐ Dealer ☐ New Motor Vehicle ☐ Used Motor Vehicle ☐ New Trailer ☐ Used Trailer ☐ New Motorcycle ☐ Used Motorcycle ☐ Moped ☐ Long Term Lessor ☐ Short Term Lessor ☐ Short Term Tlr Lessor ☐ Consignment Auction ☐ Live ☐ Internet ☐ OHV Dealer ☐ New OHV ☐ Used OHV ☐ Long Term OHV Lessor ☐ Short Term OHV Lessor ☐ OHV Manufacturer	☐ Drive School ☐ Behind-the-Wheel ☐ Classroom ☐ Correspondence ☐ Internet ☐ Minors ☐ Traffic Safety School ☐ Classroom ☐ Correspondence ☐ Internet ☐ DUI School ☐ Classroom ☐ Correspondence ☐ Internet Emission Control (Business Activity) ☐ Emission Station ☐ Gas ☐ Diesel ☐ Test Only ☐ Test & Repair ☐ Fleet, Test Only ☐ Fleet, Test & Repair

Dealers selling new vehicles must list vehicle makes franchised to sell: _____

☐ Individual ☐ Partnership ☐ LLP ☐ LLC ☐ Corporation Incorporated in State of _____ File Date _____



OWNERSHIP: List name and title of each individual, each partner, whether general or limited, or each principal officer, director or stockholder participating in the direction, control or management of the policy of the business. Use separate page if necessary. Ownership change requires notification to the Department.

Name (Last, First, Middle)	Title

Registered Agent's Information: _____

For Garage Registration Only: Additional Location(s)

Name of Business	Address	Phone Number and Managers Name	# of Technicians

Nevada Revised Statute and Nevada Administrative Code Chapters:

NRS/NAC Chapters 445B & 482	NRS/NAC Chapters 482 & 490	NRS/NAC Chapter 483	NRS/NAC Chapters 487 & 597 (Body Shop & Garage only)
Station and Inspector licensing.	Broker, Dealer, Distributor, Long Term Lessor, Manufacturer, Rebuilder, Salesman, Short Term Lessor and Transporter licensing, including Off-Highway Vehicle Industry Licensing.	Instructor and School licensing.	Body Shop, Garage, Salvage Pool and Wrecker licensing or registration.

I understand providing false information or the omission of the requested information in this application is grounds to deny, suspend, or revoke my business license or registration and constitutes a gross misdemeanor under **Chapter 482, 483, 487, 445B and 490 of the Nevada Revised Statutes**. Furthermore, I understand it is my responsibility to review the aforementioned Nevada Revised Statute and Nevada Administrative Code Chapters with respect to the license or registration I am applying for and agree to comply with the requirements stated therein. I declare under penalty of perjury that the foregoing is true and correct.

NOTE: TO BE SIGNED BY SOLE OWNER, PARTNER, OR OFFICER OF THE CORPORATION ONLY.

Signatures must be original. Photocopies are not acceptable.

Applicant's Signature

Title

Date

State of Nevada
County of _____

Subscribed and sworn to before me this _____ day of _____ 20 _____ by _____

Signature of Notary Public or Authorized Nevada DMV Representative

Notary Seal



PERSONAL HISTORY QUESTIONNAIRE

☐ New ☐ Update

This questionnaire is filed as part of the licensing application for:

Business License: ☐ Principal ☐ Registered Agent/Manager

Occupational License: ☐ Salesperson ☐ Drive School Instructor ☐ Traffic Safety School Instructor

☐ Inspector ☐ DUI School Instructor

All lines and spaces must be completed in full. If not applicable enter N/A.

Full Legal Name: _____
Last First Middle

Additional names you have been known by (*maiden name, stage name, nickname*):

Mailing Address: _____
Street City State Zip

Physical Address: _____
Street City State Zip

Primary Phone: _____ Additional Phone: _____ Email: _____

Date of Birth: _____ Place of Birth: _____
City State

Driver's License No: _____ State: _____

Social Security No.: _____ ☐ Female ☐ Male

Height: _____ Weight: _____ Hair: _____ Eyes: _____

Scars, marks, and/or tattoos: _____

Employment History for the past 5 years beginning with the most current (*without gaps*):

From (month/year)	To (month/year)	Employer	Complete Address/Telephone #



PERSONAL HISTORY QUESTIONNAIRE

Applicant's Full Legal Name: _____

List names, complete address, and phone numbers of two personal references.

Name	Address	Phone Number

Have you ever been arrested or charged with a criminal offense (including traffic offenses) in this state, any other state, any territory of the United States, or in any other nation? ☐ Yes ☐ No

Have you ever been convicted of or pled guilty/no contest to any criminal offense (including traffic offenses) in this state, any other state, any territory of the United States, or in any other nation? ☐ Yes ☐ No

***If you answered "yes" to either question (listed above), please provide the date of arrest, nature of the offense/charge, location of offense (city, county, state, etc.), and the final outcome of the offense/charge (e.g., conviction, dismissal, pending, etc.). ***

Failure to disclose any arrest(s) and/or conviction in this state, any other state, any territory of the United States, or in any other nation may result in the denial of the application.

Date of Arrest	Nature of Offense / Charge	Location of Offense / Charge	Disposition of Offense / Charge

Are you currently, or have you ever been under supervision of a parole or probation agency of any state? If yes, provide name and address of the agency, name of supervising officer and phone number. Provide a copy of your discharge; if appropriate (explain).

Child Support Information:

An applicant for the issuance or renewal of a license issued pursuant to NRS Chapters [445B](#), [482](#), [483](#), [487](#) and [490](#), shall submit to the Department of Motor Vehicles the statement prescribed by the Division of Social Services of the Department of Human Services pursuant to [NRS 425.520](#). **Please mark the appropriate statement.** Failure to mark one of the three statements will result in denial of the application or refusal to renew license.

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



PERSONAL HISTORY QUESTIONNAIRE

Applicant's Full Legal Name: _____

Have you previously held or do you presently have a business or occupational license issued by the Department of Motor Vehicles in this State or by any other State's occupational licensing authority in this state, any other state, any territory of the United States, or in any other nation? ☐ Yes ☐ No

If "Yes", license number: _____ State: _____

Have you ever had a professional, occupational, or business license (including a driver's license) in this state, any other state, any territory of the United States, or in any other nation, which was denied, revoked, suspended, or subject to disciplinary action due to criminal conduct (arrest and/or conviction) or administrative sanctions? ☐ Yes ☐ No

****If you answered yes to either question (listed above), please provide the date of offense/arrest, nature of the offense/charge, location of offense (city, county, state, etc.), and the final outcome of the offense/charge (e.g., conviction, dismissal, pending, etc.).****

I hereby authorize the Department of Motor Vehicles to make any background investigation necessary as it pertains to the issuance of my license. In relation, I authorize any person or entity contacted by the Department of Motor Vehicles, its agents or employees to furnish any information or opinions they may have during the course of my initial background investigation. I release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, Department of Motor Vehicles, its agents or employees and all persons or entities furnishing information or opinions to the Department of Motor Vehicles related to my background investigation. I understand providing false information or the omission of the requested information in this questionnaire is grounds to deny, suspend, or revoke my business or occupational license. Furthermore, I understand filing false information to obtain any license or permit is a criminal act as defined in Nevada Revised Statutes and Nevada Administrative Codes in addition to being subject to the administrative sanctions as prescribed by law.

Signature of Applicant

Date

Signatures must be original. Photocopies are not acceptable.

State of _____ County of _____

Subscribed and sworn before me this _____ day of _____, 20____ by _____

Notary Public **or** Authorized Nevada DMV Representative

(Notary Seal)

For Department Use Only

Case No.: _____

☐ Application Completed & Signed ☐ Fingerprints ☐ Background Investigation ☐ Total Fees \$ _____

Recommendation: ☐ Approved ☐ Denied

Signature of Employee _____ Date _____

Signature of Supervisor _____ Date _____
(if applicable)

Signature of Investigator _____ Date _____
(if applicable)



LETTER OF AUTHORIZATION

Please print or type

Business Name: _____ Business License Number: _____

Address: _____

City State Zip Code: _____

Telephone Number: (____) _____

Please check appropriate authorization boxes:

- | | | |
|--|---|--|
| ☐ All Activities | ☐ Pick Up Licenses | ☐ Pick Up Plates/Decals |
| ☐ Pick Up Supplies | ☐ Pick Up Titles | ☐ Sign Forms |
| ☐ Sign Renewal Form | ☐ Sign Titles | |

Printed Name of Authorized Agent

Signature

Printed Name of Authorized Agent

Signature

Printed Name of Authorized Agent

Signature

Printed Name of Authorized Agent

Signature

The listed Agent(s) is no longer authorized to represent my business:

Printed Name of Agent

Printed Name of Agent

Printed Name of Agent

Printed Name of Agent

Printed Name of Agent

Printed Name of Agent

I hereby authorize the changes as indicated above for my business with the Nevada Department of Motor Vehicles.

Printed Name of Principal

Signature of Principal

Date

To protect your business, notify the Department immediately of any changes to the above information.



VEHICLE INDUSTRY BUSINESS LICENSE BOND

Bond Number _____

License Type:

- ☐ Broker
- ☐ Dealer/Rebuilder/Lessor
- ☐ Distributor
- ☐ Manufacturer
- ☐ Off-Highway Vehicle

KNOW ALL MEN BY THESE PRESENTS:

That _____, as principal,
(Individual or Corporate Name and Name Doing Business as)

located in the County of _____, State of Nevada, obligee, and
_____, a corporation organized and existing under and by virtue of the
(Name of Surety)

laws of the State of _____, and authorized to transact a surety business in the State of Nevada, as surety,
are held and firmly bound unto the State of Nevada in the penal sum of _____ THOUSAND DOLLARS for the payment
of which well and truly to be made we hereby bind ourselves, our respective heirs, administrators, executors, successors
and assigns jointly and severally, firmly by these presents:

To be effective on the _____ day of _____, 20____

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

WHEREAS, the above-named principal has been licensed to carry on or conduct in this State the business of
buying, selling, transporting, manufacturing, distributing, brokering or dealing in new or used vehicles, trailers, motorcycles
or semitrailers; and

WHEREAS, the above-named surety herein agrees that any consumer, as defined in **NRS 482.345**, injured by the
action or actions of the principal and/or his salesmen involved in any fraud or fraudulent representation or in violation of any
of the provisions of Chapter 482 or Chapter 490 of the Nevada Revised Statutes or Nevada Administrative Codes may bring
action in said injured person's own name against the said surety. This bond is continuous in form and the total aggregate
liability of the bond is limited to the payment of the total amount of the bond. In the event of a dispute of a claim by the surety
company, application may be made to the Director, Department of Motor Vehicles for good cause shown. After notice and
hearing, the director may authorize payment of funds from here said surety coverage.



Nevada Department of **Public Safety** Fingerprint Background Waiver

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

1. You must be notified by _____ (*name of requesting agency*) that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
2. Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.
3. Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI and/or the Central Repository for Nevada Records of Criminal History may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.
4. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI and/or Central Repository for Nevada Records of Criminal History, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.
5. If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record. The procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at, 28 CFR 16.34 provides for the proper procedure to do so.

Applicant:

Initial

Date

6. If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
7. If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
8. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
9. I hereby authorize _____ (*name of requesting agency*), to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.
10. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name:

PLEASE PRINT

Last Name

First Name

Middle

Applicant's Signature: _____

Date: _____

Agency Account #: _____

Agency Representative: _____

PLEASE PRINT

Last Name

First Name

Middle

Agency Representative Signature: _____

Date: _____

Bond Number _____

This bond may be canceled by the surety at any time by giving written notice by registered mail of its desire and intention so to do. Said cancellation shall be effective thirty (30) days after the receipt of said notice by the State of Nevada Department of Motor Vehicles, Occupational and Business Licensing Section.

Signed, sealed and dated this _____ day of _____, 20____

X _____
(Principal's Signature)

(Principal's Printed Name)

(Surety)

Telephone Number of Surety: _____

(Mailing Address of Surety Company, Street)

(City, State and Zip Code)

By _____
(Signature, Attorney-In-Fact for Surety)

(Printed Name, Attorney-In-Fact)
(The Corporate Seal of the Surety Company must be imprinted or affixed to the bond form)

(Surety Seal)



DEALER FRANCHISE CERTIFICATION

License Number _____
(If new applicant, please leave blank)

Individual/Corporate Name _____

DBA Name _____

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Business Phone Number (_____) _____ - _____ FEIN _____

Manufacturer/Distributor Name _____

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Authorized Agent _____ Phone Number (_____) _____ - _____

Authorized Agent Address _____
Street City State Zip

Vehicle Make _____ Contract Effective Date _____

Assigned Sales Location _____

Please check the box that applies to Highway Vehicle Dealers:

☐

This dealership is NOT establishing, relocating or reopening at a location within the relevant market area of existing franchised dealers. Relevant market area is defined in NRS 482.3634

☐

This dealership is establishing, relocating or reopening at a location within the relevant market area of existing franchised dealers and proper written notice of intent to enter into this franchise agreement has been made to the department and to each such existing franchised dealer as required by NRS 482.36357

Please check the box that applies all Highway and Off-Highway Vehicle Dealers:

☐

A copy of the contract, including specific dealer delivery and preparation obligations, is attached for filing as required.

☐

A blanket contract, including specific dealer delivery and preparation obligations has been or is filed as required by law.

I certify that the identified dealer and manufacturer/distributor have executed a contract effective on the date specified, subject to the licensing provisions of NRS 482, for the representation and sales of the indicated make of motor vehicles in the listed assigned sales location.

Signature of Authorized Agent

Date

NOTE: In case of franchise termination or expiration, Nevada Revised Statutes require that written notice be given the dealer, including the effective date and specific grounds for termination or expiration, at least 60 days prior to the effective date and that a copy of the notice be filed with the Director of the Nevada Department of Motor Vehicles. Manufacturer and distributor responsibilities, when franchising Nevada vehicle dealers, are included in Nevada Revised Statutes Chapters 482 and 490



CERTIFICATE OF EMPLOYMENT

Please type or print in ink.

☐ **Salesman**

☐ **Inspector**

Class:

☐ One

☐ Two

☐ Gas

☐ Diesel

☐ **Drive School Instructor**

☐ CDL

☐ Non CDL

☐ **DUI School Instructor**

☐ **Traffic Safety School Instructor**

☐ New

☐ Renewal

☐ Transfer

FEES

\$ _____

\$ _____

\$ _____

☐ Behind the Wheel

☐ General Classroom

☐ General Classroom Under 18

☐ Trainee

EMPLOYEE:

Full Legal Name _____ Occupational License No. _____

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Phone No. (____) ____ - ____ E-mail Address _____

Social Security No ____ - ____ - ____ Date of Birth _____ Sex _____

Height _____ Weight _____ Hair _____ Eyes _____

I certify under penalty of perjury that all information contained in this application is true and correct.

Employee's Signature _____ Date: _____

EMPLOYER:

Business Name _____ DMV License No. _____

Address _____

City _____ State _____ Zip _____ Phone No. (____) ____ - ____

Authorized Representative's Printed Name _____

Authorized Representative's Signature _____ Date _____



OCCUPATIONAL LICENSE (SALESPERSON) DISCLAIMER

I, (print name) _____, as an applicant for a State of Nevada, Department of Motor Vehicles occupational (salesperson) license, acknowledge the following Nevada Revised Statutes:

- 482.362.1 Payment of a non-refundable license fee of \$75 . The license expires on December December 31 of each calendar year and may be renewed annually upon the payment of a fee of \$40 . A non-refundable fee of \$40, for fingerprint processing.
- 482.362.4 An application for a salesperson's license may be denied and a salesperson's license may be suspended or revoked upon the following grounds:
1. Failure of an applicant to establish by proof satisfactory to the department that he is employed by a licensed and bonded vehicle dealer, trailer dealer or semitrailer dealer, lessor or rebuilder.
 2. Conviction of a class A or B felony.
 3. Conviction of a class C, D, or E felony within the immediately preceding 10 years
 4. Conviction of a gross misdemeanor within the immediately preceding 10 years.
 5. Conviction of a misdemeanor within the immediately preceding 20 years for violation of any of the provisions of this chapter.
 6. Falsification of the application.
 7. Evidence of unfitness as described in NRS 482.3255
 8. Failure of the applicant to provide any information deemed necessary by the Department to process the application.
 9. Any reason determined by the director to be in the best interest of the public.

I am a resident of the State of _____
Driver's License No. _____ State _____

- 483.245.1 When a person becomes a resident of Nevada as defined in Chapters 482 and 483 of the NRS he must, within 30 days, obtain a Nevada driver's license as a prerequisite to driving any motor vehicle in the State of Nevada.

Signatures must be original. Photocopies are not acceptable.

Signature of Applicant _____ Date _____

State of Nevada, County of _____

Subscribed and sworn before me this _____ day of _____, _____

Notary Public **or** Authorized Nevada DMV Representative

(Notary seal)