Lyon County Business License Division
27 S. Main Street
Yerington, NV 89447
(775) 463-6501 | Businesslic@lyon-county.org

Staci Lindberg
Clerk/Treasurer

LYON COUNTY BUSINESS LICENSE CHECK LIST

The following information is required to complete your Lyon County Business License application:

- ☐ **BEFORE APPLYING:** Per Lyon County Code 5.01.02, Nonprofit Service Organizations are exempt from obtaining a Lyon County Business License. We also kindly ask that you please contact the Lyon County Planning Department to make sure that your business is allowed in your particular zone at (775) 463-6592.

- ☐ **State Of Nevada Business License:** All businesses wishing to operate in Lyon County must provide a copy of the state business license, confirmation letter or compliance letter with your application. Please visit the Secretary of State's website at www.nvsos.gov or apply online at www.nvsilverflume.gov, or call (775) 684-5708.

- ☐ **State of Nevada Occupational Licensing:** Certain occupations operating in the State of Nevada are required to obtain a Trade License (i.e. Contractors, Cosmetologists, Real Estate Brokers, Finance Companies, Marijuana Dispensaries, etc.) This licensing must be obtained prior to applying for your Lyon County Business License and a copy must be attached to your application.

- ☐ **State Sales/Use Tax Permit:** All applicants must provide a copy of a Nevada Sales or Use Tax Permit, a copy of the compliance letter or exemption letter. You can contact the Nevada Department of Taxation at their website at www.tax.state.nv.us or apply online at www.nvsilverflume.gov or by phone at (866) 962-3707, opt 8.

- ☐ **Fictitious Firm Name form:** This is a required form for every person, corporation, LLC or entity doing business as any other name other than the owner name listed on your State Business License. Please complete showing owners listed on your State of Nevada documentation and with the original, notarized signature(s) that apply in your case. ***A separate check for the $25.00 filing fee must be included.***

- ☐ **State Industrial Insurance form:** This is a required form that must be properly completed and with an original signature of an owner/corporate officer/LLC member.

- ☐ **Inspections:** All businesses within Lyon County may require inspections from the Building Dept, Fire Dept, Utility Dept, zoning verification and approval from the Lyon County Planning Department. **It is the applicant's responsibility to contact and schedule the inspections with the planning department** by calling *775-463-6592* or emailing *sjuntunen@lyon-county.org*. Any business licenses involving food will not be able to schedule inspections until a State Health Department sign off has been obtained. **ALL APPLICABLE SIGNATURES MUST BE OBTAINED BEFORE YOUR APPLICATION CAN BE PROCESSED.**

- ☐ **Child Support Form(s):** This is a required form which must be properly completed and signed by all members/ owners listed on your State of Nevada documentation.

- ☐ **Emergency Responder Form:** This is a required form which must be properly completed and signed for all commercial/industrial locations in Lyon County. Home Based Businesses are not required to fill this out.

- ☐ **Application Fee:** ***A $37.50 nonrefundable application fee shall accompany initial application.*** Proper business license fees will be calculated and required at time of issuance of license once approved. Please contact our office for final amount.

- ☐ **Other Important Information:** Business Licenses are valid for a single business and is non-transferable. Billing statements (renewal notices) are mailed out in June of each fiscal year. This is the only bill you will receive. All regular business license fees are due July 1st, with a 15 day grace period before a penalty of 15%will be applied. Per Lyon County Code 5.01.04 Item B, Failure to receive notice from the department is not a defense or excuse for non-payment of the license fee. If you do not wish to renew your business license in Lyon County, you must furnish us a written statement prior to expiration date, in order for us to close the account. Failure to adhere to the above or filled out forms that are unreadable will result in document package being returned to you to be corrected and resubmitted.

Please return application to:
Lyon County Business License Division
27 S. Main Street
Yerington, NV 89447
(775)463-6501 | Businesslic@lyon-county.org

LYON COUNTY BUSINESS LICENSE APPLICATION

Owner/Entity Name _____

FFN/DBA Name _____

Corporate/Entity Address_____

Location of Lyon County operation_____

Mailing Address_____

Federal Tax ID # _____ **Date on which business will open** _____

Business Phone _____ **Fax** _____ **Email**_____

Assessor's parcel _____ **Total # of Employees including Owners & Officers** _____

State Business License # _____ **State Sales/Use Permit #**_____

MFG Housing S & I Cert #_____ **NV State Contractors Lic #**_____

Classification _____ **Limit** _____ **NAICS Code** _____

List all owners, partners, corporate officers, managers, members, etc. Attach additional sheets if necessary.

Last, First, MI_____**Title**_____

Residence Address _____

Last, First, MI_____**Title**_____

Residence Address _____

Silver Springs Mutual Water Co.	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
State of Nevada Health Department	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
Fire Department	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
Utilities Department	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
Planning Department	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
Building Department	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**
Zoning _____ **And 2003 IBC Building Occupancy Classification**	**Approved ( )**	**Denied ( )**	_____ **Signature of Inspector**

Describe in detail the nature of your business in Lyon County, including product sold, labor performed and/or services rendered:

_____
_____
_____
_____
_____
_____
_____
_____

We ask that you visit our website and read the following codes carefully as it contains important account Renewal, Suspension and Revocation information;

*Lyon County Code **5.01.11: LICENSE RENEWAL; WHEN NEW APPLICATIONS REQUIRED***

- *https://codelibrary.amlegal.com/codes/lyoncountynv/latest/lyoncounty_nv/0-0-0-1970*

*Lyon County Code **5.01.12: SUSPENSION AND REVOCATION OF STANDARD BUSINESS LICENSE; GROUNDS; PROCEDURE***

- *https://codelibrary.amlegal.com/codes/lyoncountynv/latest/lyoncounty_nv/0-0-0-1974*

I CERTIFY AND DECLARE THAT I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AS WELL AS ACKNOWLEDGE THE INFORMATION PROVIDED IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

****Signatures must be 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 and must match names listed on State of Nevada Documentation.**

_____	_____	_____
Signature of Responsible Party	**Title**	**Date**

_____
Printed Name of Signatory

_____	_____	_____
Signature of Responsible Party	**Title**	**Date**

_____
Printed Name of Signatory

CERTIFICATE OF BUSINESS: FICTITIOUS FIRM NAME

Lyon County Clerk Treasurer, 27 South Main Street
Yerington, NV 89447 (775) 463-6501

*** * (This Form MUST be Notarized) * ***

The Undersigned do hereby certify that_____is/are
(name of person, partners or corporate name)
conducting a_____business at
(nature of business)
_____ Nevada, under the fictitious firm name
(physical business location)
of_____and that said firm is composed of the
(business name)
following person(s) whose name(s) and address(s) as follows, to wit:

1) _____
Name of person, partners or corporate officer
_____
MAILING address
_____
City, State, Zip
X _____
(Signature of: owner, partner or authorized officer)

2) _____
Name of person, partners or corporate officer
_____
MAILING address
_____
City, State, Zip
X _____
(Signature of: owner, partner or authorized officer)

3) _____
Name of person, partners or corporate officer
_____
MAILING address
_____
City, State, Zip
X _____
(Signature of: owner, partner or authorized officer)

4) _____
Name of person, partners or corporate officer
_____
MAILING address
_____
City, State, Zip
X _____
(Signature of: owner, partner or authorized officer)

STATE OF NEVADA }
} ss.
COUNTY OF LYON }

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
Lyon County, Nevada

$25.00 filing fee ***Return Original***

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.

AType 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.

LYON COUNTY SHERIFF

Brad Pope
Sheriff

CHILD SUPPORT INFORMATION

(Must be completed and signed by ALL members listed on State of Nevada Business License)

Date:_____ Employer:_____

Name (Please print):_____

Home Address:_____
(Number and Street) (City) (State) (Zip Code)

Date of Birth:_____ Social Security #:_____

Mark ONE of the three appropriate statements with an "X". Your work permit will not be processed if you do not answer one of the following:

_____ I am not subject to a court order for child support.

_____ I am in compliance with a court order of repayment plan for child support. ("In compliance" means you have paid the entire amount ordered every month.)

_____ I am not in compliance with a court order or repayment plan for child support. This means you have been court ordered to pay child support and you have not been making payments.

_____
Applicant's Signature

The court order or repayment plan must be approved by the District Attorney's Office or other public agency enforcing the order.

LYON COUNTY PROVISIONS REGULATING HOME OCCUPATION

The Home Occupation Provision is included in recognition of the needs of many people who are engaged in small business ventures which could not be sustained if it were necessary to lease commercial quarters, or which in the nature of the home occupation could not be expanded to full scale enterprise. It is the intent, however, of the ordinance that full scale commercial or professional operations which would ordinarily be conducted in a commercial or industrial district continue to be conducted in such districts and not in residential districts.

In granting a business license, it is necessary to verify that the subject property will be used in conformance with the county's zoning ordinance. Please read the following information and complete the form as indicated. If you have any questions or require further information please contact the Lyon County Business License Division at (775)463-6501 or email businesslic@lyon-county.org. For planning or zoning questions contact Kerry Page at (775)463-6592 or email kpage@lyon-county.org.

15.335.03 W. HOME OCCUPATION, GENERAL

The following list identifies those occupations which may be conducted from a residence in any district. The purpose of the list is to function both as a guide and also to illustrate the spirit and intent of what is a legitimate home occupation. Essentially, the home occupation is conceived of as being reasonably permitted in a residential setting because it does not compromise the residential character of the area. A reasonable home occupation would not generate conspicuous traffic, would not visually call unusual attention to the home nor would it ever generate nonresidential level noise.

Examples of a Home Occupation Business

• Accounting, Bookkeeping	• Appraisal	• Architecture
• Computer Repair/Programming	• Legal Services	• Real Estate Sales •
• Insurance Sales	• Daycare with Six (6) Children or Less	• Drafting Services
• Dressmaking, Alterations, Tailoring	• Engineering and Surveying	• Financial Planning and Investment Services
• Fine Arts or Artisan's Studio(creation of individual works only, no mass production)	• Interior Decoration (no studio permitted)	• Mail Order Business 1'(order taking only, no stock in trade)
• Musical Instruction, Voice or Instrument	• Pet Grooming (Enclosed)	• Photo Laboratory (no studio work)
• Planning	• Tutoring	• One Chair Beauty or Barber Shop
• Office Work	• Cottage food operations, conformant all requirement within NRS 446-866	• Similar, Low Impact Endeavors

1. The use must be conducted entirely within the interior of the residence, must be clearly incidental and secondary to residential occupancy, and may not change the residential character of the dwelling.
2. The use of the dwelling for a Home Occupation may not exceed up to 25% of one floor of the principal building.
3. Residents of the dwelling must be engaged in the home occupation with no more than one (1) nonresident assistant employed.
4. No activity can take place as a home occupation which involves any outdoor storage.
5. All parking needs brought about by the operation of the home occupation must be met through off street parking (including any customer parking). Driveways may be used to meet this requirement, however the driveway used to provide off-street parking shall be provided on the parcel being used for the home occupation use to the satisfaction of the director.
6. All uses allowed under home occupations must maintain a valid County business license and any state and/or federal licenses (if necessary).

15.335.03 X. Home Based Business

The following lists those occupations, which may be conducted as a home based business (HBB). The home based business differs from the home occupation in that it is not required to be conducted within the residence proper, but may be conducted in another building accessory to the residence. Slightly more intense uses may occur within the HBB since it is sited within less densely settled areas.

• Limited Equine Boarding	• Auto and Farm Equipment Repair Work	• Building Contractor's Storage Yard Including Electrical, Plumbing, & Mechanical
• Landscape Contractor	• Farm-To-Fork Events (subject to compliance with NRS 466 and inspections/license from State Health Department)	• Fine Arts or Artisan's Studio (not using equipment larger than hand tools) Pottery Work, Jewelry Making, Metalwork, Leatherwork, or similar Fine Art Manfacture
• Woodworking	• Gunsmith	• Sign Painting
• Homemade Clothing	• Lapidary	• Painting
• Sculpture	• Similar, Low Impact Endeavors	

1. The Home Based Business may be carried out in no more than one (1) building separate from the primary residence. Storage of materials used with the Home Based Business in a second accessory shed is permissible.

2. All outside storage areas including dumpsters must be:

   a. sited to the rear of the building,

   b. in compliance with the setbacks required of the building's underlying zone, and,

   c. designed such that they are concealed from all adjacent properties and public rights-of-way through installation of either fencing and/or vegetative screening.

3. All outdoor stored or used equipment and materials must be fully screened either by fencing or landscaping from any abutting residential use or public rights of way.

4. The accessory building in which the HBB is conducted may not exceed the square footage of the footprint of the residence but in no event exceed the allowances contained in 15.335.03 A

5. Nonresident employees may work in the HBB as follows:

   a. Up to l,000 square feet of floor space - One (1) nonresident employee

   b. 1,000 and over square feet of floor space - Two (2) nonresident employees

6. Hours of any HBB associated outdoor noise shall be limited to times from dawn to dusk in any residential area.

7. Parcel must meet the standard minimum size requirements for the district in which it is located

8. Home Based Businesses which allow clients or customers to visit the business may be subject to Accessibility Standards. Applicants should contact the Building Department for requirements prior to applying for the Home Based Business Permit.

9. All parking needs for employees of a HBB and any clients or customers that may come to the HBB must be met through off-street parking.

10. All uses allowed under Home Based Business must maintain a valid business license and any state and/or federal licenses (if necessary).

This signed statement will become part of your business license record with Lyon County.

Please answer a few questions pertaining to the nature and activity of your
Home Occupation Business or Home Based Business

I am applying for a Home Occupation Business_____Home Based Business_____

Percentage of house involved %_____ Foot traffic? Yes_____ No_____ # of Employees _____

How do you advertise_____ Signage? Yes_____No_____ Where will it be?_____

What type of marketing and/or distributing is involved?_____

Is any type of machinery used? Yes_____No_____ If so, what type?_____

Do you store material on site? Yes_____No_____ Type of material stored on site?_____

Quantity of product made_____

Additional building separate from primary residence? Yes_____ No_____Description of additional building:_____

Are chemicals used or stored on site? Yes_____No_____If yes, what type and how stored_____

_____

Are materials stored outside and/or in view of neighbors? Yes_____No_____If yes, what is stored and where_____

_____

Write a detailed description of process:_____

_____

_____

_____

_____

_____

_____

I, _____ will be conducting business as _____ at my home address located at_____ I have read the above information and if granted a Home Occupation Business license or Home Based Business license, I agree to comply with these regulations as set forth above.

Applicant's signature_____Date_____

LYON COUNTY CLERK/TREASURER

27 South Main Street
Yerington, Nevada 89447
Phone: (775)463-6501
Fax: (775)463-5305

Staci Lindberg
Clerk/Treasurer

HANDYMAN AND YARD MAINTENANCE BUSINESS LICENSE RESTRICTIONS

NRS 624.031 Applicability of chapter: Exemptions. The provisions of this chapter do not apply to:

1. Work performed exclusively by an authorized representative of the United States Government, the State of Nevada, or an incorporated city, county, irrigation district, reclamation district, or other municipal or political corporation or subdivision of this State.

2. An officer of a court when acting within the scope of his or her office.

3. Work performed exclusively by a public utility operating pursuant to the regulations of the Public Utilities Commission of Nevada on construction, maintenance and development work incidental to its business.

4. An owner of property who is building or improving a residential structure on the property for his or her own occupancy and not intended for sale or lease. The sale or lease, or the offering for sale or lease, of the newly built structure within 1 year after its completion creates a rebuttable presumption for the purposes of this section that the building of the structure was performed with the intent to sell or lease that structure. An owner of property who requests an exemption pursuant to this subsection must apply to the Board for the exemption. The Board shall adopt regulations setting forth the requirements for granting the exemption.

5. Any work to repair or maintain property the value of which is less than $1,000, including labor and materials, unless:

a. A building permit is required to perform the work;

b. The work is of a type performed by a plumbing, electrical, refrigeration, heating or air-conditioning contractor;

c. The work is of a type performed by a contractor licensed in a classification prescribed by the Board that significantly affects the health, safety and welfare of members of the general public;

d. The work is performed as a part of a larger project: 1.The value of which is $500 or more; or 2. For which contracts of less than $500 have been awarded to evade the provisions of this chapter; or

e. The work is performed by a person who is licensed pursuant to this chapter or by an employee of that person.

6. The sale or installation of any finished product, material or article of merchandise which is not fabricated into and does not become a permanent fixed part of the structure.

7. The construction, alteration, improvement or repair of personal property.

8. The construction, alteration, improvement or repair financed in whole or in part by the Federal Government and conducted within the limits and boundaries of a site or reservation, the title of which rests in the Federal Government.

9. An owner of property, the primary use of which is as an agricultural or farming enterprise, building or improving a structure on the property for his or her use or occupancy and not intended for sale or lease.

10. Construction oversight services provided to a long-term recovery group by a qualified person within a particular geographic area that is described in a proclamation of a state of emergency or declaration of disaster by the State or Federal Government, including, without limitation, pursuant to NRS 414.070 . A long-term recovery group may reimburse such reasonable expenses as the qualified person incurs in providing construction oversight services to that group. Except as otherwise provided in this subsection, nothing in this subsection authorizes a person who is not a licensed contractor to perform the acts described in paragraphs (a) and (b) of subsection 1 of NRS 624.700 . As used in this subsection:

a. "Construction oversight services" means the coordination and oversight of labor by volunteers.

b. "Long-term recovery group" means a formal group of volunteers coordinating response and recovery efforts related to a state of emergency or disaster that is proclaimed or declared by the State or Federal Government.

c. "Qualified person" means a person who possesses the abilities, education, experience, knowledge, skills and training that a long-term recovery group has identified as being necessary to provide construction oversight services for a project to be performed by that group.

For more information, please contact the Nevada Contractor's Board at 9670 Gateway Drive, Suite 100, Reno, NV 89521. The phone number is (775) 688-1141.

Any person who sells nursery stock must obtain a license from the Department of Agriculture. This includes retail and wholesale nurseries, hardware and home improvement centers, landscapers, landscape architects, brokers and peddlers. For more information, please contact the Nevada Department of Agriculture at 405 S. 21st St., Sparks, NV 89431. The phone number is (775) 353-3744.

I, _____, hereby swear that I will comply with all local, state and federal requirements. I will not perform any work that would require a contractor's or nursery license.

_____ _____

Applicant Signature Date