



FRANCISCO V. AGUILAR
Secretary of State
401 North Carson Street Carson
City, Nevada 89701-4201 (775)
684-5708
Website: www.nvsos.gov

Exemption to the Nevada State Business License

Sole Proprietor and General Partnership

TYPE OR PRINT - USE DARK INK ONLY - DO NOT HIGHLIGHT

1. Type of exemption filing:	Type of State Business License being filed: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> General Partnership	Changes:
	Check the action being taken with this filing: <input type="checkbox"/> Application <input type="checkbox"/> Renewal <input type="checkbox"/> Amendment <input type="checkbox"/> Cancellation (If amending an exemption, please mark the appropriate section(s) below to be changed.)	
2. Name of Applicant, Member, Owner or Partner: (The name of the person(s) claiming the exemption.)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> First Name Middle Initial Last Name Suffix Additional Partner or Spouse (if spouse is to be listed on license - sole proprietor only) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> First Name Middle Initial Last Name Suffix	<input type="checkbox"/> <input type="checkbox"/>
	3. Business Address: (The physical street address and, if different, the mailing address where the person will be conducting business in this State) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Physical Street Address (required) City State Zip Code Country: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Mailing Address (only if different from above) City State Zip Code Country: <input type="text"/>	<input type="checkbox"/>
4. Additional contact information:	Email address: (required per NAC 76.100) <input type="text"/> Phone number: <input type="text"/>	<input type="checkbox"/>
5. Nevada Business ID number: (Required if renewing, amending or canceling)	Nevada Business Identification Number (NVID) located on the State Business License: <input type="text"/>	
6. Transacting business name(s): (Required for Partnership licenses. Sole proprietor optional)	Name under which applicant transacts or intends to transact business: <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
7. Exemption being requested:	<input type="checkbox"/> Exemption 001: A Governmental Entity Applicable to "Other" state business license only. Pursuant to NAC 76.040 the Secretary of State interprets the term "Governmental entity" to mean: (a) The government of the United States, this State or any other state or territory of the United States or an incorporated or unincorporated agency or instrumentality thereof; (b) A corporation which is wholly owned by the government of the United States; and (c) A county, city, town, district or other political subdivision of this State or any other state or territory of the United State. Indicate branch of governmental ownership: <input type="text"/>	<input type="checkbox"/>



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Sole Proprietor, General Partnership, "Other" Non-Title 7 License

7. Exemption being requested: (continued)

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Exemption 003: A Home Based Business

Applicable to Sole Proprietor and General Partnership state business license only.

Pursuant to NAC 76.040, a natural person who individually, or a married couple who jointly, operates a business and performs **all essential business functions** exclusively from his or her personal residence in this State. In addition, no part of the personal residence is held open to the general public for use in furtherance of that business that would require the posting of a business license in accordance with a county or municipal ordinance.

Pursuant to NAC 76.100 (6): Please provide a description of your business:

Pursuant to NAC 76.080: Please provide your net earnings reported on the federal income tax return filed with the Internal Revenue Service for that business for the preceding tax year:

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Exemption 004: A Natural person who sole business is the rental of four (4) or fewer dwelling units.

Applicable to Sole Proprietor state business license only.

Pursuant to NRS 76.020 this exemption so for a natural person whose sole business is the rental of four or fewer dwelling units to others. Location of rental units:

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Exemption 006: Insurance Company

Applicable to Sole Proprietor, General Partnership and "Other" state business licenses.

The exemption from the requirement to obtain a state business license which is set forth in NRS 680B.020 applies only to a person who Conducts business under a license or certificate of authority issued by the Division of Insurance of the Department of Business and Industry pursuant to title 57 of NRS. Please provide the number of that license or certificate of authority for verification:

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8. Signature: (Required, form will be returned if unsigned.)

I declare the information contained in the form is true, correct and complete to the best of the person's knowledge and belief and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing with the Office of the Secretary of State. And the statutory requirements for an exemption from the requirement to obtain a state business license pursuant to NRS 76.020 have been met.

X

Signature of Applicant, Member, Owner or Partner

Date

Title

X

Signature of Partner or Spouse

Date

Title