



City of Henderson

# Business License Checklist

240 S. Water Street Henderson, Nevada 89015 • 702-267-1730

Temporary sales or service permit

**Applications may be submitted via mail or in person. The Business Operations Division requires original signatures on all forms. All items on this checklist, unless otherwise noted, must be submitted at the time of application. Incomplete applications will not be accepted. This checklist must be returned with the application.**

**Please note that a Temporary sales or service permit is not required for a City sponsored or co-sponsored event. Proof of City sponsorship must be provided to the Business Operations Division by the sponsoring City Department/Division.**

## **HMC 4.05.375 Temporary sales or service permit.**

Each applicant for a temporary sales or service permit shall pay a permit fee of \$50.00. The permit shall be for a period not to exceed 14 calendar days and must be for one location. Further, except as otherwise provided herein, an applicant is limited to one temporary sales or service permit per calendar quarter.

A. Each applicant shall furnish the following to the division no later than ten calendar days prior to the event:

1. Written permission of the property owner or, in the case of a retail location, the written authorization of the store management;
2. Proof of a State of Nevada sales tax permit, if applicable;
3. Approval of the community development and services department; and
4. Any other license or permit as may be required by any department of the city, the state, or the federal government.

B. The requirement to submit applications for temporary sales or service permits ten calendar days prior to the scheduled event may be waived at the director's discretion.

C. Notwithstanding the foregoing, the director may issue temporary sales or service permits to an applicant in excess of the one permit per calendar quarter limit, in the following instances:

1. For pumpkin sales lots, haunted houses, and Christmas tree sales lots.
  - a. The temporary sales or service permit for these activities may exceed 14 days.
  - b. In no case shall the sales or service permit exceed a period of 45 calendar days.
2. For Arts, crafts and business trade shows.
  - a. For purposes of this chapter an arts, crafts and business trade show is an event with a minimum of 20 vendors wherein at least 50 percent (50%) of the vendors provide only handmade items, including, but not limited to, decorative items, clothing and food that has been created for sale by the craftsman.
  - b. In no case may an applicant exempt from the restriction of one temporary sales or service permit per calendar quarter pursuant to subsection 4.05.375(C)(2) be granted more than sixteen (16) temporary sales or service permits in a single calendar year, and no more than two (2) temporary sales or service permits in any single month.
3. If a conditional use permit has been approved by the Planning Commission or Council in excess of the stated limit of one per calendar quarter, but in no case shall an applicant be granted more than eight (8) temporary sales or service permits in a single calendar year.

## **Applicants must submit the following:**

- ☐ Complete **Temporary Sales Permit Registration Form**
- ☐ **Zoning Compliance Checklist** to be submitted to the Community Development and Services Department, 702-267-1500 (A license will not be issued until all requirements and conditions have been met.)
  - Please include with the form:
    - ☐ A legible site plan or building layout that clearly identifies the location that the business will be occupying
- ☐ Copy of active **State License** filed with the **Nevada Secretary of State** (to be provided by corporations, limited liability companies and limited partnerships)
- ☐ Proof of current sales tax permit or exemption from the **State of Nevada Department of Taxation\***

**Business License Hours of Operation: Monday-Thursday, 8:00 a.m. to 4:30 p.m.**

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- ☐ **Written permission of the property owner or, in the case of a retail location, the written authorization of the store management**
- ☐ Copy of **Health Permit** or **Health Certificate**, as applicable
- ☐ Copy of **Animal Handlers' Permit**, as applicable
- ☐ **Letter of Authorization** (if the application has been signed by someone other than an owner or corporate officer).
- ☐ **\$50.00** permit fee

**\* Nonprofit organizations will not be required to provide the identified items. However, they must provide proof of current registration with the Internal Revenue Service.**

**Please contact the City of Henderson Department of Building and Fire Safety at 702-267-3620 regarding permits required for outdoor sales and events.**

**Note: Approval of this permit may be conditioned or restricted based on the requirement of other city, state or federal licenses or permits.**

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City of Henderson  
**Temporary Sales or Service Permit Registration**  
 240 S. Water Street, Henderson, NV 89015 (702-267-1730)

**Business Information**

<b>Applicant</b> (as filed with NV Secretary of State, if applicable):				
<b>Nevada Business ID: NV</b>		<b>City of Henderson License No.</b> (if applicable):		
<b>Type of Business Organization:</b>		<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership		
<b>Business Name (DBA):</b>				
<b>E-mail Address:</b>				
<b>Phone:</b>			<b>Fax:</b>	
<b>Street Address:</b>			<b>City, State, Zip:</b>	
<b>Mailing Address:</b>			<b>City, State, Zip:</b>	
<b>Owner(s), Partner(s), Corporate Officer(s), Etc.</b>				
<b>Name:</b>	<b>Title:</b>	<b>Phone:</b>	<b>Cell</b>	<b>Home</b>
Home Address:	City, State, Zip:		DOB:	
<b>Name:</b>	<b>Title:</b>	<b>Phone:</b>	<b>Cell</b>	<b>Home</b>
Home Address:	City, State, Zip:		DOB:	
<b>Name:</b>	<b>Title:</b>	<b>Phone:</b>	<b>Cell</b>	<b>Home</b>
Home Address:	City, State, Zip:		DOB:	

**Event Information**

<b>Event Name</b> (if applicable):	
<b>Date(s)</b> (not to exceed 14 calendar days*):	<b>Times:</b>
<b>Address:</b>	
If event is being held at a City owned site, provide name of park or property:	
<b>Description:</b> Provide a description of the nature of the event. Attach separate sheet if necessary. Please note that the permit, if issued, shall be valid only for the period specified in this application, which may not exceed fourteen calendar days. <b>*In the cases of pumpkin sales lots, haunted houses, and Christmas tree sales lots, which shall be allowed for a period of up to forty-five calendar days.</b>	
<b>Event Details: (Complete all items.)</b> Number of Attendees Anticipated: _____  Arts/Crafts/Trade Show - <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Number of Vendors _____ <b>AND</b> Number of Vendors Providing Only Handmade Items _____ Food Sales - <input type="checkbox"/> Yes <input type="checkbox"/> No    Alcohol Sales - <input type="checkbox"/> Yes <input type="checkbox"/> No    Use of Animals - <input type="checkbox"/> Yes <input type="checkbox"/> No Use of Pyrotechnics - <input type="checkbox"/> Yes <input type="checkbox"/> No    Use of Open Flame Devices - <input type="checkbox"/> Yes <input type="checkbox"/> No Use of Tent(s) - <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, provide square footage of tent(s): _____	
<b>Certification:</b> If granted the permit applied for, I will conduct all activities in accordance with the provisions of the laws of the United States and the State of Nevada as well as all applicable ordinances of the City of Henderson. I further acknowledge that such application is made upon the express condition that if such permit be granted it shall be subject to revocation in accordance with the provisions of Title 4 of Henderson Municipal Code.	
<b>Signature of Applicant:</b>	<b>Date:</b>

Proposed Business Name/DBA \_\_\_\_\_

Applicant/Contact Name \_\_\_\_\_

Proposed Business Address \_\_\_\_\_ ☐ Executive Suite

Primary Phone \_\_\_\_\_ ☐ Business ☐ Cell Email: \_\_\_\_\_

☐ New Business ☐ Change of Ownership ☐ Change of Address ☐ Update Business Activity ☐ Special Event

Concisely describe the specific business activity:

**Does the business use or store hazardous materials/chemicals?** ☐ Yes ☐ No

If YES, applicant must complete [hazardous materials questionnaire](#) (also available at Community Development).

**What is the square footage of the space your business will occupy?** \_\_\_\_\_ square feet

**\*Home-Based Business Only:** By signing below, you are acknowledging you have read and will comply with the Home Occupation standards in Section 19.9.3.D of the Henderson Municipal Code. Also, you are acknowledging you are the property owner or have obtained permission from the property owner to operate a home-based business at the above-referenced address. Non-compliance is grounds to revoke the business license.

**\*Non-Residential Locations Only:** A site plan or building layout that clearly identifies the location the business will be occupying is required for all applications.

**The information provided is accurate and correct:**

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Final approval by the Community Development Department **is not granted until the items below and City Inspections** are completed.

### DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

APN	_____ <input type="checkbox"/> Address Verified <input type="checkbox"/> Redevelopment Overlay
ZONING	_____ <input type="checkbox"/> Home-Based Business
USE CLASSIFICATIONS AND COMMENTS	
APPROVAL CONDITIONS	<input type="checkbox"/> Conditional Use Permit # _____ <input type="checkbox"/> Temporary Use Permit # _____ <input type="checkbox"/> Design Review # _____ <input type="checkbox"/> Variance # _____ <input type="checkbox"/> Vehicle Travel Distance # _____ <input type="checkbox"/> Zone Change # _____ <input type="checkbox"/> Pre-Existing Use _____ <input type="checkbox"/> Other _____
STATUS	<input type="checkbox"/> Permitted <input type="checkbox"/> Denied <input type="checkbox"/> Pending _____
CD REVIEW	_____ Signature _____ Date _____
FIRE PERMIT REQUIREMENT	<input type="checkbox"/> Required <input type="checkbox"/> Not Required Date: _____ <div style="text-align: right;">Fire Plans Initials _____</div>