



**CITY OF BOULDER CITY  
NON-RESIDENT BUSINESS LICENSE APPLICATION**

REV 3/07

401 California Ave. Boulder City NV 89005  
Mailing address: PO Box 61350 Boulder City NV 89006  
Phone 702-293-9219 Fax 702-293-9411

DATE: \_\_\_\_\_

The undersigned hereby applies for a Business License for:

A. BUSINESS NAME: \_\_\_\_\_ Phone \_\_\_\_\_

Business Address \_\_\_\_\_

Mailing Address: \_\_\_\_\_

B. NATURE OF BUSINESS:

Retail  Service  Wholesale  Contractor \_\_\_\_\_ (classification)  Mobile Food Vendor

Explain fully: \_\_\_\_\_

**Include a copy of the following:**

1. Current City or County Business License from the issuing city where the office is located.
2. Any State Required License (ex. Contractors, Bail Bonds, Pest Control, Real Estate, etc.)
3. Corporations need to list all officers' names, home addresses, phone numbers, DOB & SSN on a separate sheet of paper.

C. BUSINESS OWNER(S) or (If partnership) List on separate sheet of paper if necessary.

Owner: \_\_\_\_\_ Title: \_\_\_\_\_

Home Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone number: \_\_\_\_\_

D. NAME OF APPLICANT:

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Home Address: \_\_\_\_\_

E. ANNUAL BILLING  SEMIANNUAL BILLING

License fees are listed below and will be prorated for the initial application.

1. RETAIL BUSINESS	\$175.00 annual fee – or \$100.00 semiannual fee	\$ _____
2. SERVICE BUSINESS	\$100.00 annual fee – or \$ 65.00 semiannual fee	\$ _____
3. WHOLESALE BUSINESS	\$100.00 annual fee – or \$ 65.00 semiannual fee	\$ _____
4. CONTRACTOR	\$200.00 annual fee – or \$115.00 semiannual fee	\$ _____
5. MOBILE FOOD VENDOR	\$ 80.00 annual fee – or \$ 40.00 semiannual fee	\$ _____
6. COIN OPERATED MACHINES	\$ 25.00 per machine X ___ number of machines)	\$ _____
PRORATED FOR _____ MONTHS		\$ _____

I/We do hereby declare that all statements contained in this application are true and correct to the best of my knowledge, and that misrepresentation or failure to reveal information requested may be deemed sufficient cause for refusal to issue or revocation of a City License. Should this application be granted, I/We will accept such license subject to the terms and provisions of the Ordinance under which granted.

Signature of Applicant: \_\_\_\_\_ Title: \_\_\_\_\_

(Document must be notarized if not signed in presence of Boulder City Business License Personnel)

**OFFICE USE ONLY**

License # \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Clerk: \_\_\_\_\_