

Department of Business License

Vincent V. Queano, Director 500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR

BOX 551810

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http://www.clarkcountynv.gov/businesslicense

- Please fill out form completely; use black ink only; incomplete, illegible, or altered application forms will be returned
- Holiday Event Permit applications are required to be filed with the Department of Business License at least ten (10) days prior to the

commencement of the holiday event.											
Payments can be made by cash, check, or money order made payable to: Clark County Department of Business License. Description Payments Payment											
BUSINESS INFORMATION Date of Application:		Business Name:									
Date of Application:		Business Name:									
				T =							
Business License #:		Phone Number:		Email:	Email:						
EVENT INFORMATION											
Location/ Address of Event (Include Suite Number		r): City/ State:		Zip Code:							
Event Start Date: Event End		Date:	Date: Hours (Start Time):		Hours (End Time):						
		, , ,		,	, , , ,						
Description of events											
Description of event:											
BOND INFORMATION											
	,	Company Name:	Company Name:								
List the name, address and telephone number of the bonding or insurance company for this event:		Full Address (incl. City, State, Zip Code):									
							Phone Number:				
		Did you attach a conv of	the Rond or Insurance	for Event to this application?		□ Bond		ce for Event			
Did you attach a copy of the Bond or Insurance for Event to this application? ☐ Bond ☐ Insurance for Event Please check any ancillary activities (certain activities will require additional permits):											
				Liquor sales (Requires Liquor Caterer or Off-premise Liquor Permit)							
SIGNATURES (requires signatures of owner, officer, authorized or legal signer)											
I certify the information provided herein and attached is true and accurate to the best of my knowledge. I understand that providing											
false, misleading or fraudulent statements on this application or supporting documentation may be grounds for denial of this license											
or later revocation, suspension or non-renewal.											
	Applicant's Printed Name and Title										
Signature Applicant's Printed Name and Title FOR OFFICIAL USE ONLY											
Parks and Recreation	□ Approve □ □	Disapprove	Reviewed by:		Date						
Public Works	□ Approve □ □	Disapprove	Reviewed by:		Date						
Pusinoss Liconso	☐ Annrove ☐ Dis	annrove	Paviawad hu		Date						