

ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708

Website: www.nvsos.gov

Nevada State Business License Partnership Exemption

Application
Renewal

Online exemption application is also available at www.nvsilverflume.gov

USE BLACK INK ONLY - DO NOT HIGHLIGHT

PRINT LEGIBLY OR TYPE ALL INFORMATION

Completing this form <u>DOES NOT</u> relieve you of any statutory or regulatory requirements relating to your business. You may be required to complete a Nevada Business Registration form with the Nevada Department of Taxation and Department of Employment, Training and Rehabilitation. Please check with these and other state/local government agencies for additional licensing requirements.

* Asterisks indicate **required** information. Incomplete forms will be rejected.

INSTRUCTIONS:

- 1. This form is for partnerships claiming an exemption pursuant to the State Business License provisions of NRS 76.020.
- 2. If you are exempt from the requirements of the State Business License pursuant to NRS 76.020 enter the applicable code in Section 4:
 - 003 A home-based business whose net earnings are not more than 66 2/3 percent of the average annual wage
 - 005 A business whose primary purpose is to create or produce motion pictures
 - 006 Insurance company doing business pursuant to NRS 680B.020 that does not conduct any business that is not incidental to Title 57 (Div. of Ins. Authority).
- 3. File online at www.nvsilverflume.gov or return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- 4. A partner of the partnership claiming exemption from the State Business License requirement must sign the application. FORM WILL BE RETURNED IF UNSIGNED.

1*	Signature must be that of a partner of the partnership. I declare under penalty of perjury that the information provided is true, correct and complete to the best of my 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 in the Office of the Secretary of State. I declare we are exempt from the provision of the State Business License pursuant to NRS 76.020.											
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	First Name		Middle (Optional)		Last Name		Suffix	Title				
	V											
	Signature of Partner			Dat	e							
2	NV Business ID # (Required if you have a current Nevada State Business License or had one issued after October 1, 2009)											
3*	Partnership Name											
4*	I am exempt from the requirements of the State Business License. Cite exemption code (See instructions for code)											
	If claiming 005 exe	If claiming 005 exemption provide Nevada Film Office Registration #										
	If claiming 006 exe	If claiming 006 exemption provide Nevada Division of Insurance License #										
5*												
	Physical Address Physical Stree		t Address				City		State Zip Code			
6	Mailing Address											
	(if different)	PO Box or Street Address					City		State Zip Code			
7	Entity Phone ()										
8	Email Address						Check here to rec	eive notices	electro	nically		