



# CITY OF RENO BUSINESS LICENSE REVIEW FORM

1 East First Street, 2<sup>nd</sup> Floor, Reno NV 89501

P.O. Box 1900, Reno NV 89505

Phone: 775-334-2090 | Fax: 775-334-1212

Website: [www.reno.gov](http://www.reno.gov) | Online Portal: [www.onenv.us](http://www.onenv.us)

## APPLICANT MUST MARK ALL QUESTIONS BELOW

The following information is mandatory and will be used to determine fees and inspections required to process your business license application. Incomplete forms will not be accepted. Prior to applying for a business license, we recommend verifying your proposed business use is permitted for the zoning district in which you plan to locate by calling the Planning Division at 775-321-8309 or [planning@reno.gov](mailto:planning@reno.gov). Additional permits may be required by the respective department at the time of inspection.

### **BUILDING/ZONING DIVISION:**

1) Is this business location in a commercial or residential structure?	<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential
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If **residential** is marked, read and initial the following disclaimer:  
*I have received and read the home-based business criteria & certify I will maintain compliance with these & all regulations to preserve the validity of my business license.*

Initials here: \_\_\_\_\_  
(skip to Fire Prevention Division)

2) Are you the first tenant in a new building?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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3) Are you changing the use of a building or suite? <i>Examples include, but are not limited to: garage to office, office to deli, retail to salon, etc.</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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Specify changes:

4) Are you making any construction improvements to the space? <i>Examples include, but are not limited to: Adding or removing doors, walls, windows, adding sinks or electrical outlets, etc. Exclude any cosmetic improvements such as carpet or painting</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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Specify changes:

5) Will your business be operating within the hours of 6:00 AM to 11:00 PM?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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If **no**, provide the proposed hours of operations: From: \_\_\_\_\_ To: \_\_\_\_\_

6) Is this space a warehouse, distribution center, or manufacturing facility?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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If **yes**, what is the square footage? *A lease must be provided as a supplement* \_\_\_\_\_ Sq Ft

7) Will you be operating a mobile food vending business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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If **yes** is marked, read and initial the following disclaimer:  
*I have read and received Reno Municipal Code 4.05 and certify I will maintain compliance with these & all regulations to preserve the validity of my business license.*

Initials here: \_\_\_\_\_

### **FIRE PREVENTION DIVISION:**

1) Are you renting a booth/space from an existing or already established business? <i>Examples include, but are not limited to: executive suites, massage therapist, tattoo parlor, etc.</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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2) Does your suite or office have an exterior door?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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3) Are you using your residence for any type of child care or adult care facility?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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**NORTHERN NEVADA PUBLIC HEALTH:**

1) Are you going to be serving or selling food to the public in any fashion?  
*Examples include, but are not limited to: vending, bar, restaurant, catering, mobile food unit, grocery, warehouse*  YES  NO

2) The following list of business types may require a health permit/inspection. If applicable, select the appropriate boxes.

<input type="checkbox"/> Apartment Rental complex with pool/spa	<input type="checkbox"/> Recycling business or center
<input type="checkbox"/> Childcare	<input type="checkbox"/> School
<input type="checkbox"/> Hotel/Motel	<input type="checkbox"/> Solid waste hauling
<input type="checkbox"/> Liquid Waste Hauling	<input type="checkbox"/> Invasive body decoration
<input type="checkbox"/> Medical Waste	<input type="checkbox"/> Temporary food events
<input type="checkbox"/> Medical/Doctor/Dental Office	<input type="checkbox"/> Mobile home park
<input type="checkbox"/> Pool/Spa – Open to the public	<input type="checkbox"/> Waste tire hauling
<input type="checkbox"/> Chemical storage/mfg of waste generation	<input type="checkbox"/> Mobile operations, carpet cleaning

**ENVIRONMENTAL CONTROL DIVISION:**

Per Reno Municipal Code 12.16, commercial/industrial type sewer uses are required to be inspected to determine what impact the operation might have on the sewer and storm drain systems. In general, if your business falls into one of the following types of commercial establishments, you may need an annual Environmental Control Permit and annual inspection. If applicable, select the appropriate boxes.

<input type="checkbox"/> Auto repair, paint shop, or body shop	<input type="checkbox"/> Prepare, sell, serve, or clean up of food for human or animal consumption
<input type="checkbox"/> Replacement fluid for autos or trucks	<input type="checkbox"/> Convenience store
<input type="checkbox"/> Car wash	<input type="checkbox"/> Bar/serving liquor
<input type="checkbox"/> Facility with sand-oil interceptor	<input type="checkbox"/> Facility containing any kitchen equipment, grease interceptor, or grease traps
<input type="checkbox"/> Facility with X-Ray using chemical fixer or developer	<input type="checkbox"/> Manufacturing facility
<input type="checkbox"/> Silk screening, photo facility or studio	<input type="checkbox"/> Painting, metal finishing, or powder coating
<input type="checkbox"/> Printing facility	<input type="checkbox"/> Dry cleaning or commercial laundry
<input type="checkbox"/> Mobile Operations	<input type="checkbox"/> Dental office
<input type="checkbox"/> Storage of products, hazardous substance and/or waste generation that may be harmful to the environment <i>Examples include, but are not limited to: waste oil, transmission fluid, solvents, thinners, organic liquids, acids, alkaline material, X-Ray fixer, etc.</i>	

I, the undersigned, understand that (1) it is unlawful for any person to transact or conduct any business without first having obtained a business license; (2) this document is an application only and certain conditions must be met before a business license will be issued; (3) I certify under penalty of perjury that the information submitted on and with this application is true and correct to the best of my knowledge.

Licensee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use ONLY:

Previous Business and Status: \_\_\_\_\_ License Number: \_\_\_\_\_