

CITY OF ELKO NEW BUSINESS LICENSE APPLICATION PROCESS

If you are conducting business either directly or indirectly inside the City limits of Elko, whether or not your actual business is located within the City of Elko, you must obtain an Elko City Business License.

If you are conducting a business that requires any type of State licensing (i.e. Contractors or Realtors licensing) or permitting this must be obtained before a City Business License will be issued. Attach a copy of your State License to your Elko Business License application.

It is recommended that you register the name of your business with the Elko County Clerk's office. You may contact them at 775-753-4600.

Please contact the Nevada Secretary of State's office to determine if you are required to file for a Nevada State Business License with their office. You may contact them via their website at www.nvsos.gov or by phone at 775-684-5708.

If this license is for a commercial business in the City limits requiring water service you must contact the Elko City Water Department to determine the billing status. The Water Department phone number is 775-777-7135.

If you are planning on conducting your business from your home inside Elko City limits, you must first contact the City Planning Department regarding a Home Occupation Permit. The Planning Department is located at City Hall and the number is 775-777-7160.

Following are the steps necessary to complete the application. When completed return the application to the Elko City Business License Department at 1751 College Ave. Elko, NV 89801.

1. Complete the City of Elko Business License Application.
2. The attached Department Approval form shows phone numbers and addresses of all required signatures the licensee must obtain for a City business license. The signatures are required to confirm that the business has met all applicable City Building, Fire and Zoning codes. It also confirms compliance with any applicable State codes. **If there are code issues a license will not be issued until the business has met all required codes.**

**** If your "fixed place" of business is located outside the City limits, or you have an approved Home Occupation Permit, the Planning, Building, Development and Fire Marshal signatures are not required. If you are not dealing with food it is not necessary to obtain the Health Department approval.**

3. Pursuant to NRS 268.095 (5) all new businesses must register with the Nevada Department of Taxation or provide verification that they are registered with the Taxation Department, or verification that they do not need to be registered. Enclosed is the contact information for Taxation. A link is also attached to our website.
4. The Non-Residential Wastewater Pretreatment Questionnaire must be completed and returned with the application. (Only for those businesses physically located in the Elko City limits and not located in the home.)
5. The Child Support Form is required by the State of Nevada and must be completed by all applicants.
6. Please read through the Duties as an Elko City Business Licensee Form and sign on the back.
7. The Affirmation of Compliance must be completed and signed in the presence of an Elko City employee at the City office. If it cannot be signed in the presence of the employee it must be notarized.
8. If your business is located in the Elko City limits and is not out of your home, you must complete the Central Dispatch Form.
9. The cost for a new business license is **\$34.50 with a one time processing fee of \$25.00**. If the business is a bank, utility company, or housing rental (hotel, apartment, rooming house, trailer), those fees will be determined at the time the application is submitted. When you have completed all the required documentation and obtained the signatures, and fees are collected, you will be able to start your business and a business license will be issued to you promptly.
10. All business licenses are issued on a yearly basis based on your gross income within the Elko City limits. A renewal notice reminder will be mailed to you each year. However, if you do not receive the reminder, you are still responsible for renewing your license. Failure to renew your license by the required deadline will result in a 25% penalty after 30 days and a 50% penalty after sixty days and possible closure of your business.
11. Payments may be made by mail or in person, by check, cash, (no cash by mail) Visa or Mastercard. We do not accept credit card payments over the phone.

You must notify the City of any changes in the business or if you are no longer in business.

For questions regarding this process, or for a copy of the Business License Ordinance, contact the City Business License office at 775-777-7138. You may also visit our website at elkocity.com.



City of Elko, Nevada
Business License Application
1751 College Avenue
Elko, NV 89801
Phone (775)777-7138 Fax (775)777-7129

Information on this form must be printed or typed.

1. Check all that apply: New Business Change in Location Change in Name Change in Mailing Address
 Other _____

2. Corporate Name _____
 Corporate Telephone _____

3. Federal Tax Identification Number _____

4. Corporate Address _____
Street Number, Direction (N, S, E, W) Name, Suite, Unit or Apt. City, State, Zip Code

5. Business Name (dba) to be shown on the license: _____
 Business Telephone _____ Cellular Telephone _____
 Fax _____

6. Mailing Address _____
Street Number, Direction (N, S, E, W) Name, Suite, Unit Or Apt. City, State, Zip Code

7. Physical Address _____
Street Number, Direction (N, S, E, W) Name, Suite, Unit Or Apt. City, State, Zip Code

8. Type of Business Entity: Sole Proprietor S. Corp Privately Held Corp. Partnership
 Limited Liability Partnership Limited Liability Company

9. Name of All Owner(s), Partners, Corporate Officers, Members, etc. Attach additional sheets if necessary

Name (Last, First, MI)	Title (Owner, Officer, Member, etc.)	Percent Owned
Residence Address	City, State, Zip	Residence Phone
Name (Last, First, MI)	Title (Owner, Officer, Member, etc.)	Percent Owned
Residence Address	City, State, Zip	Residence Phone
Name (Last, First, MI)	Title (Owner, Officer, Member, etc.)	Percent Owned
Residence Address	City, State, Zip	Residence Phone

10. Describe the Nature of Your Business in Detail. _____

11. If this business requires a State License (i.e. contractors, cosmetologists, realtors, etc.) list the license number and expiration date: _____

12. If you have acquired the business from another owner or have changed the name of the business please list prior owner and/or prior name.

Previous Owner _____

Previous Business Name _____

13. I certify the information provided in this application is true, correct and complete to the best of my knowledge and belief. If partnership more than one signature is required.

Signature/Original _____ Print Name & Title _____ Date _____

Signature/Original _____ Print Name & Title _____ Date _____

**ELKO CITY BUSINESS LICENSE DEPARTMENT
APPROVAL FORM
1751 COLLEGE AVE. ELKO, NEVADA 89801
PHONE: 775-777-7138
FAX: 775-777-7129
EMAIL: buslic@ci.elko.nv.us**

Business Name _____ Date _____

Business Address _____

The business license applicant is required to obtain signatures from the departments listed below. Please contact each department to arrange an appointment.

1. _____
Elko City Fire Marshal
911 West Idaho Street. Elko, NV 89801
775-777-7345

2. _____ **(PLEASE NOTE: The Building Official will not sign
off without the Fire Marshal's signature.)**
Elko City Building Department
1753 College Ave. Elko, NV 89801
775-777-7220

3. _____
Elko Development Department
1755 College Ave. Elko, NV 89801
775-777-7213

4. _____
Public Health Department ID# _____
1020 Ruby Vista Dr. Ste. 103 Elko, NV 89801 Expiration Date _____
775-753-1138

5. _____
Elko City Planning Department
1751 College Ave. Elko, NV 89801
775-777-7160

6. _____
Business License Department
1751 College Ave. Elko, NV 89801
775-777-7138

7. Type of proof provided from the Nevada Department of Taxation

CITY OF ELKO INSTRUCTIONS
FOR FILING WITH THE NEVADA DEPARTMENT OF TAXATION

Pursuant to NRS 268.095(5) the City of Elko requires all businesses to register with the Nevada Department of Taxation prior to the issuance of an Elko City Business License. If you are not required to register with the Department of Taxation, the City must be provided with verification from the Department of Taxation stating that the business is not required to be registered. This verification can be provided either in writing, email or fax from the Department of Taxation. Below is the phone number, website, email and fax number for the Reno Department of Taxation office, please contact them regarding this portion of the Business License Application. The City of Elko Business License Department cannot assist with the completion of the Nevada Department of Taxation forms.

After the business has registered with the Nevada Department of Taxation or if the business is already registered, verification must be provided to the City before the Business License will be issued. Below is a list of documentation which may be presented as proof:

- A copy of your Nevada Business Registration with the Department of Taxation's validated received stamp on it.
- A copy of your Nevada State Sales Tax Permit.
- Proof of confirmation via email or fax from the Department of Taxation.
- Proof of confirmation from the Nevada Tax online system.
- An actual certificate signed by you and the Department of Taxation employee or notary.

Please be sure that contact is made to the Reno Department of Taxation at the following location:

Nevada Department of Taxation Reno Office

Address: 4600 Kietzke Lane Building L, Suite 235, Reno, NV 89502

Phone: 775-687-9999

Fax: 775-688-1303

Website: www.tax.state.nv.us

Email: renoontimes@tax.state.nv.us List "Elko City Business License" in the subject line.

NOTE: If you are requesting changes to your Elko City Business License (i.e., change in location) and you are registered with the Nevada Department of Taxation, you will be required to submit verification that the changes have been submitted to the Department of Taxation.



CITY OF ELKO NON-RESIDENTIAL WASTEWATER DISCHARGE QUESTIONNAIRE

The City of Elko operates and maintains the Water Reclamation Facility (WRF) that serves the City's businesses and residents. Federal General Pretreatment Regulations listed in 40 CFR 403.2, aim to:

1. prevent the introduction into publicly owned treatment works (POTWs) of pollutants, including interference with its use or disposal of municipal sludge
2. prevent introduction into POTWs of pollutants that pass through the treatment works into receiving waters or that might otherwise be incompatibles with the treatment works
3. improve opportunities to reclaim and recycle municipal and industrial wastewaters and sludge(s)
4. reduce the health and environmental risk of pollution caused by the discharge of toxic pollutants to POTWs

In order to comply with state and federal regulations the City has approved a Pretreatment Ordinance (Ordinance 675), which includes a regular pretreatment inspection program. As part of this program the City of Elko requires all business owners to supply us with the information necessary to determine whether or not the business requires pretreatment before its waste stream can be discharged into the City's sewer system. Please complete the attached questionnaire and submit it with your Elko City Business License Application.

We recommend that each business owner determines if pretreatment is necessary for his / her business and verifies that all necessary pretreatment measures can be implemented at the business location **before** signing a lease or purchase agreement.

Should you have questions or need more information please contact the Environmental Coordinator at 775-777-7213.

A. Contact Information:

1. Business/Company Name _____

2. Water/Sewer Service Account Number (provided on your water bill): _____

3. Business Location: _____
Street City State Zip

4. Business Mailing Address: _____
Street City State Zip

5. Owner/Chief Executive Officer: _____
Name Title

Address: _____
Phone: _____
E-mail: _____

6. Person to be contacted about this questionnaire: _____
Name Title

Address: _____
Phone: _____
E-mail: _____

7. Person to be contacted in case of emergency (e.g. spillage): _____

Name

Title

Address: _____

Phone: _____

E-mail: _____

B. Business Information:

1. Description of Business Activity: _____

2. Industrial Activities:

If your business participates in any of the activities or utilizes any of the materials listed below please check the appropriate box. Please check the sewer disposal box if your business discharges any wastewater, sludge, or solids other than sanitary waste, sludge, or solids into the City of Elko's sewer collection system.

	Yes	No	Sewer Disposal
Adhesives	___	___	___
Automotive Painting	___	___	___
Automotive Repairs/Serviceing	___	___	___
Boiler Blowdown	___	___	___
Commercial Car Wash	___	___	___
Commercial Laundry	___	___	___
Cooling Water Blowdown	___	___	___
Demineralization (Reverse Osmosis /Exchange Resins)	___	___	___
Equipment Cleaning/Washing	___	___	___
Equipment Repairs/Serviceing	___	___	___
Film/X-ray Developing	___	___	___
Food Preparation	___	___	___
Gum/Wood Chemicals	___	___	___
Heavy Equipment Repairs/Serviceing	___	___	___
Hospital/Medical Clinic	___	___	___
Inorganic Chemicals	___	___	___
Laboratory (Medical, Science, Analytical, Soils, Assay, etc.)	___	___	___
Light Equipment Repairs/Serviceing	___	___	___
Printing	___	___	___
Radiator Repairs	___	___	___
Medical Health Services	___	___	___
Mine Support (Goods and Services)	___	___	___
Mineral Exploration (Drilling, Geology, Etc.)	___	___	___
Ore Mining	___	___	___
Organic Chemicals	___	___	___
Paint, Ink, Dyes	___	___	___
Pesticides, Herbicides, Biocides	___	___	___
Petroleum Products	___	___	___
Pharmaceuticals	___	___	___
Restaurant	___	___	___
Soaps, Detergents	___	___	___
Solvents, Cleaners	___	___	___
Other (describe below)	___	___	___

Description of "other" industrial activity/material _____

3. Does your business have floor drains? If yes, list all locations. _____

4. Does your business have any connections to the City's storm water drain collection system? _____

I certify that the information above is true and correct to the best of my knowledge.

Signature: _____ Title: _____ Date: _____

Print Name: _____

Business Name _____

CHILD SUPPORT INFORMATION

Please mark the appropriate response.

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or
- I am subject to a court order for the support of one or more children and am **not** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Please note at the bottom of this form, if said business is a partnership or corporation.

Thank you in advance for your cooperation in this matter.

My business is a partnership or corporation.

Signature of Applicant

Date

STATE OF NEVADA, DIVISION OF INDUSTRIAL RELATIONS
AFFIRMATION OF COMPLIANCE
WITH MANDATORY INDUSTRIAL INSURANCE REQUIREMENTS
(Instructions with Definitions are located on reverse side)

Business Name (Include any name doing business as)	Type of Business	Business Telephone Number	
Business Address	City	State	Zip Code
Federal Identification No.	Social Security No.	Contractor's Board License No.	
Name of Principal Owner (Please Print)		Principal Owner's Telephone No.	
Principal Owner's Address	City	State	Zip Code

Identified as: (Complete one section only)

- That the above identified business has obtained industrial workers' compensation insurance as required by Chapter 616A to D, inclusive, of the Nevada Revised Statutes (NRS):

Effective Date of Coverage	Account Number
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- That the above identified business is not subject to the provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes, due to a statutory exemption or as a business which has no employees nor hires any independent contractor or subcontractor.

- That the above identified business has a valid certificate of self-insurance pursuant to Chapter 616A to D, inclusive, of Nevada Revised Statutes.

Effective Date	Certificate Number
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I declare that I have the authority to act on behalf of the above described business, and am applying for a license to operate said business as a(n): Individual Sole Proprietor Partnership Corporation

Name of Applicant (Please Print)	Applicant's Telephone No.
Applicant's Residence Address	City State Zip Code

I do hereby affirm that the above information is true and correct.

DATED this _____ day of _____, 20_____.

Signature of Applicant (To be signed in the presence of the business license office employee)	Applicant's Title
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Witness Signature - (Business License Office Employee)	Name of City or County
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If unable to sign this document in the presence of a Business License Employee, the Applicant's signature must be notarized.

SUBSCRIBED and SWORN to before me on this _____ day of _____, 20_____.

 NOTARY PUBLIC

INSTRUCTIONS

The provisions of Chapter 616A to D, inclusive, of the Nevada Revised Statutes require every person, firm, voluntary association, and private corporation, including any public service corporation, which has any person, subcontractor, or independent contractor, under contract of hire, to obtain industrial insurance coverage in Nevada or obtain a certificate of self-insurance from the Nevada Commissioner of Insurance. **Subcontractors and independent contractors engaged in the same trade, business, profession or occupation as the hiring person or business, are by law considered to be employees.** One exception to the requirement for industrial insurance is if you or your business hires no employees, subcontractors or independent contractors. You are not required to obtain industrial insurance coverage for the following employees: theatrical or stage performers; casual musicians; household domestics, farm, dairy, agricultural or horticultural laborers, or persons engaged in stock or poultry raising; voluntary ski patrolman; real estate brokers and/or salesmen; direct sellers; or clergy. Businesses which elect to obtain industrial insurance coverage for such persons, gain valuable rights and significantly reduce liabilities for injuries to these persons. **A business which hires persons who are exempt from the provisions of Chapter 616A to 617, inclusive, of the Nevada Revised Statutes may be held liable in tort for injuries to those persons.** A business which hires exempt persons may elect to obtain industrial insurance, including sole proprietor coverage and partnerships.

IMPORTANT NOTICE: Pursuant to the provisions of NRS 616D.200(1): Any employer within the provisions of NRS 616B.633 who fails to provide, secure or maintain compensation as required by the terms of this chapter, is: (a) for the first offense, guilty of a **misdemeanor** and (b) for a second or subsequent offense committed within 7 years after the previous offense, guilty of a **category D felony**.

Definitions for Purposes of this Affirmation:

"Applicant" is the person executing this document.

"Business Name" is the name under which the business will operate, including the identification of any other names under which the entity will do business.

"Corporation" is a business which is incorporated in the state of Nevada or in any other state, and which is recognized as an active corporation by the Secretary of State for the State of Nevada.

A Type of Business@ means the nature of business . . .

"Individual" is a person who operates a business which hires no employees, subcontractors or independent contractors.

"Partnership" is a business which is owned and operated by two or more individuals who share ownership rights to the net profits of the business and who share in all the liabilities of that business. A limited partnership is included in the term partnership if the limited partners are investors only, and do not perform services for the business.

"Principal Owner" is the owner, sole operator, designated general partner, or resident agent for the corporation.

"Sole proprietor" is a self-employed owner of an unincorporated business and includes working partners and members of working associations which may or may not hire employees.

DUTIES AS AN ELKO CITY BUSINESS LICENSEE

Please read and sign on the back page.

The following information pertains to the Elko City Business License Ordinance regarding your duties as a licensee and the payment and renewal process. Please read this and sign that you understand and agree to the contents. This includes only significant portions of the ordinance, the entire ordinance is available at your request.

4-1-12 DUTIES OF LICENSEE AND INSPECTION AUTHORITY OF CITY PERSONNEL

A. Duties of licensee. Every licensee under this Chapter shall:

1. Ascertain and at all times comply with all Federal, State, County and/or Municipal laws, ordinances and regulations applicable to such licensed business.
2. Prominently display the business license in licensee's place of business.
3. Permit all reasonable inspections of his business and examination of his books by public authorities so authorized by law.
4. Avoid all unlawful, improper or unnecessary acts, practices or conditions in the conduct of his business which do or may effect the public health, morals or welfare or constitute a public nuisance.
5. Refrain from operating the licensed business in the City after expiration of the license or in such cases where the license is revoked, canceled, or suspended.

B. Inspection authority of City Personnel. The City Clerk, Building Official, Fire Marshall, City Planner and the Chief of Police and their respective designees are authorized to make all investigations reasonably necessary for the enforcement of this Chapter and shall have the authority to inspect licenses, their business records, or premises to determine and enforce compliance with this Chapter. All persons authorized herein to inspect licensees and businesses shall have the authority to enter, with or without search warrant, at all reasonable times, the following premises:

1. Those for which a license is required.
2. Those for which a license was issued and which, at the time of inspections, are operating under said license.
3. Those for which the license has been revoked, canceled, or suspended.

4-1-13 GROUNDS FOR SUSPENSION, CANCELLATION OR REVOCATION OF BUSINESS LICENSE:

Any business license issued pursuant to the provisions of the Chapter may be suspended, canceled or revoked for good cause by the Board of Supervisors.

A. CAUSE. Good cause for such suspension, cancellation or revocation shall include, but is not limited to:

1. The existence of unsanitary conditions, noise, disturbances, or other conditions at, near or in the premises which causes or tends to create a public nuisance or which may injuriously affect the public health, safety or welfare.
2. The commission of, or permitting or causing the commission of, any act in the operation of the business which is prohibited by any ordinances, rule or law of the City, State or Federal government.
3. Fraudulent practices and misrepresentation in the operation of the business.
4. Concealment or misrepresentation in procuring the business license.
5. The business for which the license has been issued is unlawful or is prohibited by any ordinance, code, rule or law of the City, State of Nevada or Federal Government.
6. The license was issued by mistake or is in violation of any of the provisions of this Chapter.
7. The premises used to conduct said business has been condemned, declared a fire hazard or declared unsafe for business occupancy to applicable building and fire codes.
8. The use of the premises for the business license violates the zoning ordinances or regulations of the City.

4-1-9 PAYMENT OF BUSINESS LICENSE FEES

A. When Payable. All regular business license fees shall be paid in full in advance upon the original issuance of the business license and annually thereafter at the office of the City Clerk in legal currency of the United States.

B. Daily License. Daily licenses provided in this Chapter shall be due and payable in advance. The daily license shall cover a period of 12:00 midnight to 12:00 midnight of the next day.

- C. Penalty.
 1. If any license provided for by this Chapter is unpaid for more than thirty (30) days after the due date, a penalty of twenty-five (25%) of the annual fee shall be added and collected by the City Clerk or his/her designee.
 2. If any license provided for by this Chapter is unpaid for more than sixty (60) days after the due date, a penalty of fifty percent (50%) of the annual fee shall be added and collected by the City Clerk or his/her designee.
- D. City Attorney to Bring Suit for Delinquent License. The Board of Supervisors may at any time direct the City Attorney to bring a civil action in the name of the City for the recovery of the applicable business license fee against any person who engages in, conducts or carries on any business, game, profession or exhibition for which a license is required by the provisions of this Chapter without procuring such license and paying the prescribed license tax.
- E. Refunds. All licenses shall be issued for the period of time set forth in this Chapter and no license shall be entitled to a refund of any portion of the fee paid by reason of the termination of the licensed activity prior to the expiration of the time for which the license was issued.

4-1-10 RENEWAL OF BUSINESS LICENSE:

- A. Application for Renewal. One month before the expiration date of any business license, the City Clerk or his/her designee shall send a business license renewal application to all business licensed in the City. The application and appropriate business license fee must be returned to the City Clerk's office prior to the expiration date of the business license. Failure to notify any licensed business shall not be held to waive the requirement to file a renewal application or pay the license fee, and the actual receipt of such notice is in no way required.
- B. One month after the expiration date of any license, the City Clerk or his/her designee shall send a second notice and include an assessment of the twenty five percent (25%) penalty on the reported gross revenues.
- C. Two months after the expiration date of any license, the City Clerk or his/her designee shall send a third and final notice and include an assessment of the fifty percent (50%) penalty.
- D. All expired licenses in excess of sixty (60) days delinquency shall be served with a notice of such penalty and intent of City to publish in the local newspaper as operating without a business license in accordance with the provisions set forth in this Chapter.
- E. A notice of delinquency shall be served upon a licensee by delivery to the person at the business premises licensed, if the person is present. If the person is not present, service may be made by delivery to the person in actual charge of the premises at the time of service. If the business is closed, service may be made by mailing by certified mail with return receipt requested, the same to the person at the mailing address for the business as the same is shown on the current business license and by posting upon the front door. Delivery is effective upon a date of delivery or posting and mailing as the case may be.
- F. Report of Gross Revenues of the Business Required. Where the license fee for a renewed business license is calculated upon the gross revenues of the business, the applicant must state, under oath, the amount of business in terms of gross revenues which he did in the preceding year.

In the case of business making sales and rendering services, the gross revenue from both sales and services shall be considered the equivalent of gross sales.

The City Clerk or his/her designee may examine or cause to be examined, the books and accounts of any business required to file a renewal application for the purpose of verifying the amount of gross receipts reported for such business.

Any person who willfully files a false statement of gross sales/receipts shall be guilty of a misdemeanor and punishable as hereinafter in this code provided.
- G. Issuance of Business License by City Clerk. Upon approval of the application for renewal of a business license, and upon collection of the appropriate business license fee, The City Clerk or his/her designee shall issue the business license to the applicant.

I have read and agree to abide by the ordinances set forth as an Elko City Business Licensee.

SIGNATURE

DATE

Central Dispatch Administrative Authority

725 Aspen Way

Elko, Nevada 89801

775-777-7300

Dear Business Owner:

The Central Dispatch Administrative Authority is working to serve the businesses of the area in an efficient manner. To accomplish this goal we are contacting each business to obtain the information needed to update our records. Please fill out this form and return it to the Central Dispatch Administrative Authority at 725 Aspen Way, Elko NV 89801.

This information is vital to assist the law enforcement agencies to better serve your business after hours. THIS INFORMATION WILL NOT BE RELEASED TO THE GENERAL PUBLIC, WE WILL ENTER IT INTO OUR COMPUTER SYSTEM TO BE USED FOR OFFICIAL PURPOSES ONLY.

BUSINESS NAME

PHONE NUMBER

BUSINESS ADDRESS

If there is a problem with my business after hours, I would like the following people called. (please place in the order in which you wish notified first, second, etc.) Please list **at least** two people if at all possible.

1. NAME _____

HOME ADDRESS _____

HOME PHONE # _____

2. NAME _____

HOME ADDRESS _____

HOME PHONE # _____

3. NAME _____

HOME ADDRESS _____

HOME PHONE # _____

4. NAME _____

HOME ADDRESS _____

HOME PHONE # _____

SPECIAL INSTRUCTIONS (if any):

EXAMPLE: Animal(s) on premises/hazardous materials/Alarm Company name and phone number if available. Any other information to aid in officer safety or the safety of other emergency personnel responding.

Should any information provided above change, please notify the Dispatch Center at 777-7300 as soon as possible. Updating this information assists us in providing the best service and protection possible for your business. Thank you for helping us to serve you better.

Please feel free to Fax this back to the center at 738-5604.

CENTRAL DISPATCH ADMINISTRATIVE AUTHORITY

NEVADA SAFETY AND HEALTH PROTECTION ON THE JOB

The Nevada Occupational Safety and Health Act, NRS Chapter 618, provides job safety and health protection for workers through the promotion of safe and healthful working conditions throughout the State of Nevada. Requirements of the Act include the following:

EMPLOYERS: Each employer shall furnish to each of his employees employment and a place of employment free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees; and shall comply with occupational safety and health standards adopted under the Act.

EMPLOYEES: Each employee shall comply with all occupational safety and health standards, rules, regulations and orders issued under the Act that apply to his own actions and conduct on the job. The Nevada Occupational Safety and Health Administration (Nevada OSHA) of the Division of Industrial Relations, Department of Business and Industry, has the primary responsibility for administering the Act. Nevada OSHA enforces occupational safety and health standards, and its Safety and Health Representatives/Industrial Hygienists conduct jobsite inspections to ensure compliance with the Act.

INSPECTION: The Act requires that a representative of the employer and a representative authorized by the employees be given an opportunity to accompany the Nevada OSHA inspector for the purpose of aiding the inspection. Where there is no authorized employee representative, the Nevada OSHA Safety and Health Representative/Industrial Hygienist must consult with a reasonable number of employees concerning safety and health conditions in the workplace.

COMPLAINT: Employees, public or private, or their representatives have the right to file a complaint with the nearest Nevada OSHA office requesting an inspection if they believe unsafe or unhealthful conditions exist in their workplace. Nevada OSHA will hold confidential names of employees complaining.

The Act provides that employees may not be discharged or discriminated against in any way for filing safety and health complaints or otherwise exercising their rights under the Act. An employee, public or private, who believes he has been discriminated against may file a complaint within thirty (30) days of the alleged discrimination with the nearest Nevada OSHA office or with Occupational Safety and Health Administration, U.S. Department of Labor, 71 Stevenson Street, P.O. Box 3766, San Francisco, CA 94119-3766.

CITATIONS: If upon inspection Nevada OSHA believes an employer has violated the Act, a citation alleging such violations will be issued to the employer. Each citation will specify a time period within which the alleged violation must be corrected. The Nevada OSHA citation must be prominently displayed at or near the place of alleged violation for three days, or until it is corrected, whichever is later, to warn employees of dangers that may exist there.

PROPOSED PENALTY: The Act provides for mandatory penalties against employers of up to \$7,000 for each serious violation and for optional penalties of up to \$7,000 for each nonserious violation. Penalties of up to \$7,000 per day may be proposed for failure to correct violations within the proposed time period. Also, any employer who willfully or repeatedly violates the Act may be assessed penalties of up to \$70,000 for each such violation.

Criminal penalties are also provided for in the Act. Any willful violation resulting in death of an employee, upon conviction, is punishable by a fine of not more than \$20,000 or by imprisonment for not more than six months, or by both. Conviction of any employer after a first conviction doubles these maximum penalties. Penalties may be proposed for public employers.

VOLUNTARY ACTIVITY: While providing penalties for violations, the Act also encourages efforts by labor and management, before a Nevada OSHA inspection, to reduce injuries and illnesses arising out of employment. The Nevada Occupational Safety and Health Administration of the Division of Industrial Relations, Department of Business and Industry, encourages employers and employees to reduce workplace hazards voluntarily and to develop and improve safety and health programs in all workplaces and industries. Such cooperative action would initially focus on the identification and elimination of hazards that could cause death, injury, or illness to employees and supervisors. Further information and assistance will be provided by Nevada OSHA to employees and employers upon request.

MORE INFORMATION: Additional information and copies of the Act, specific Nevada OSHA safety and health standards, and other applicable regulations may be obtained by calling or writing the nearest Nevada OSHA district office in the following locations: Southern Nevada - 1301 N. Green Valley Pkwy., Ste 200, Henderson, NV 89074 - Telephone: (702)486-9020 - Fax: (702)990-0358 Northern Nevada - 4600 Kietzke Lane, Ste F-153, Reno, NV 89502 - Telephone: (775)824-4600 - Fax: (775) 688-1378

NOTE: Persons wishing to register a complaint alleging inadequacy in the administration of the Nevada Occupational Safety and Health Plan may do so at the following address: OSHA, U.S. Dept of Labor, 71 Stevenson St., P.O. Box 3766, San Francisco, CA 94119-3766 - Telephone: (415)975-4310

EMPLOYERS: This poster must be displayed prominently in the workplace.