

**HELPFUL  
PHONE NUMBERS  
AND WEBSITES**

1. MISSOURI DEPARTMENT OF REVENUE  
(573)-751- 5860
2. MISSOURI SECRETARY OF STATE  
[www.sos.mo.gov](http://www.sos.mo.gov)
3. MISSOURI DEPARTMENT OF LIQUOR  
CONTROL 573-751-2333
4. MISSOURI STATE HIGHWAY PATROL  
[www.mshp.dps.missouri.gov](http://www.mshp.dps.missouri.gov)
5. NEVADA PLANNING AND ZONING  
(417) 448-5113
6. NEVADA FIRE DEPARTMENT  
(417) 448-5105
7. NEVADA POLICE DEPARTMENT  
(417) 448-5100
8. VERNON COUNTY ASSESSOR  
(417) 448-2530
9. VERNON COUNTY HEALTH DEPT  
(417) 667-7418

FINANCE  
DEPARTMENT



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**OCCUPATION AND  
MERCHANT LICENSE  
REGISTRATION  
FORM  
INSTRUCTIONS**

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**City of Nevada-Licensing**  
110 South Ash  
Nevada, MO 64772  
Phone: (417) 448-5115  
Fax: (417) 381-1938  
[www.nevadamo.gov](http://www.nevadamo.gov)

Monday – Friday, 8:30 AM – 4:30 PM

**City of Nevada,  
Missouri**

# HOW TO COMPLETE YOUR REGISTRATION

Thank you for your interest in starting a business in Nevada. Following are instructions on completing the registration forms, which are available online at [www.nevadamo.gov](http://www.nevadamo.gov) or at the City of Nevada Finance office. If you should need further assistance please contact the **City of Nevada Licensing at (417) 448-5115**

Application should be submitted a minimum of 15 days before business will begin.

*The annual license year is June 1 through May 31<sup>st</sup>. Renewals are due by May 31 and delinquent July 1.*

## SECTION 1

**Corporation** Enter the name of the corporation or limited liability Corporation if applicable.

**Doing Business As** Enter the DBA name. This must match your signage and advertising. The business name must be registered with the Secretary of State at [www.sos.mo.gov](http://www.sos.mo.gov).

**Business Address** Enter the physical location of the business even if it is not in city limits, or is your home.

**Mailing Address.** Complete only if different from your business address.

**Business Phone and Fax.** These numbers will be given out, upon request. It should be the actual business phone and *not* the corporation number.

## SECTION 2

**Name of Owner(s),** Partners, Corporate Officers, etc. List the owners, partners, or officers of your business. Include their title, home address and phone number.

**Applicant** The person making application must be the owner, manager or agent. Enter your full name, title, phone number, date of birth, social security number, driver's license number and full home address.

## SECTION 3

**Business Description** Give a concise description of the types of transactions the business will conduct.

Plumbing and Electrical contractors must attach a list of all Master, Journeyman and Apprentices. Masters must submit proof of qualifications.

HVAC contractors will attach a list of employees and include verification of training.

For Plumbing, Electrical and HVAC requirements, call 417-448-5113.

### **The following businesses shall report:**

- **Restaurants: seating capacity**
- **Hotels: # of rooms**
- **Taxi service: # of taxis**
- **Refuse Service: # of trucks**
- **Manufacturers: square footage**
- **Insurance: # of companies represented**
- **Barber / Beauty: # of stations**
- **Bowling Alley: # of alleys**

- **Ice Cream Vendor: # mobile units**

## SECTION 4

**Retail Sales** Enter the total dollar amount of all goods, wares and merchandise for sale made taxable by law. New applicants, attach a copy of your Missouri Retail Sales license and a Missouri Certificate of No Tax Due. Renewal applicants only need to attach the Certificate of No Tax Due. The license must be open for Nevada. The Missouri Department of Revenue can answer any questions regarding the retail sales license, and can be reached at (573)751-5860.

## SECTION 5

**Door-to-Door** List the number of persons that will be going door-to door in Nevada and the dates they will be working. If the goods or services will be provided by a company other than *your* employer, report their name address and phone number.

*\*Note:* Each person must submit a photo id, Highway Patrol Criminal Records Check ([www.mshp.dps.missouri.gov](http://www.mshp.dps.missouri.gov)), fingerprints taken by the Police Department (417-448-5100), past 7 years of criminal history including traffic, misdemeanor and felony convictions. (Month, year and court jurisdiction required) Listing of all vehicles to be used including year, make, model and license plate number. Applications should be submitted a minimum of 15 days prior to solicitation to allow adequate time for processing.

## SECTION 6

**Applicant Signature** The applicant must sign and date the application.