



Occupational and Business Licensing
555 Wright Way
Carson City, Nevada 89711
684-4690
www.dmvnv.com

DEPOSIT STATEMENT

Licensee's Name _____

Business Name _____

Address _____
Street City State Zip

Licensee has placed on deposit with the Director of the Department of Motor Vehicles (Check the appropriate deposit):

- 1. Cash in the amount of \$ _____
2. United States Bonds with the actual market value of \$ _____
Further describe as _____
3. State of Nevada Bonds with the actual market value of \$ _____
Further described as _____
4. Savings/Time Certificate No _____ in the amount of \$ _____
Bank/Savings and Loan _____
Address _____
Street City State Zip
Representative's Name _____ Phone _____

If the deposit is reduced or there is an outstanding court judgment for which the licensee is liable under the deposit, the business license is automatically suspended.

Pursuant to provisions contained in NRS Chapters 482, 483, 485, 487, 445B and 597, the financial institution is hereby notified that funds in the amount and account indicated are unavailable for withdrawal except upon order of the Nevada Department of Motor Vehicles. Signatures must be original. Photocopies are not acceptable.

Signature of Applicant _____ Date _____

State of Nevada County of _____

Subscribed and sworn before me this _____ day of _____

Notary Public or Authorized Nevada DMV Representative Signature _____ (Notary Seal)

Accepted by the Department of Motor Vehicles this _____ day of _____

Director of the DMV or his appointed representative _____