



555 Wright Way
Carson City, NV 89711
Reno/Sparks/Carson City (775) 684-4DMV (4368)
Las Vegas Area (702) 486-4DMV (4368)
Rural Nevada or Out of State (877) 368-7828
www.dmv.nv.com

APPLICATION FOR NON-RESIDENT BUSINESS PERMIT
NRS Chapters 445 and 482

Please select one:

New Permit Issuance [] Renewal of Permit [] Reprint of Decal []

PLEASE PRINT OR TYPE

Business Name _____ FEIN _____

Physical Address _____
Street Address City State Zip Code

Mailing Address _____
Street Address City State Zip Code

Phone Number _____ Email Address _____

Vehicle will be based in _____ County.
(Nevada county)

Vehicle Information

Vehicle Identification Number (VIN)

Grid for VIN entry: 17 empty boxes

Year _____ Make _____ Model _____

Manufacturer's Gross Vehicle Weight Rating _____
If the manufacturer's GVWR is 26,000 lbs. or greater, contact the Motor Carrier Division for registration requirements (NRS 706).

Registration Information

State of Registration _____ Expiration Date of Registration _____

Name on Registration _____

Insurance Information

NAIC/Policy Number _____ Effective Date _____ Expiration Date _____

Emission Information

Certificate Number _____ State _____ Station Number _____

The issuance of this decal allows the operation of this vehicle on Nevada roadways in conjunction with a valid registration and insurance from another state, country, or place of which the owner is a resident.

Per NRS 482.3961, a fee of \$200.00 will be charged for the first vehicle and \$150.00 for each additional vehicle in which an owner obtains a permit and this decal is non-transferable and expires one year from issuance. If you do not provide a smog certificate from your original state, then NRS 445B.700 to 445B.815 inclusive will apply and you may be required to get a Nevada emission test.

Trailers are exempt and do not require a decal.

When the decal is received, please follow the instructions and remove the decal from the back of the document.

NOTE: It is a gross misdemeanor to use a false or fictitious name or address in this application, knowingly make a false statement, knowingly conceal a material fact, or otherwise commit a fraud in this application.

Signature _____ Date _____
Registered Owner Title

For Office Use Only: Documents Shown Registration [] Insurance Card [] Emission Certificate [] Technician's initials & number