



Occupational and Business Licensing
 555 Wright Way
 Carson City, Nevada 89711
 775-684-4690
dmv.nv.gov

DEPOSIT STATEMENT
 NRS 482, NRS 487, NAC 445B, and NRS 490

Licensee's Name _____ DMV Business License # _____

Business Name _____

Address _____
Street City State Zip

In lieu of a bond, licensee has placed a deposit with the Nevada Department of Motor Vehicles (NV DMV).

(Check the appropriate deposit):

1. Cash in the amount of \$ _____

2. Savings/Time Certificate - Account No _____ In the amount of \$ _____

Bank/Credit Union Name: _____

Physical Address: _____
Street City State Zip Code

Representative's Name: _____ Phone: _____

Please initial next to each statement.

_____ I understand a deposit may be disbursed by the Director of NV DMV, in an amount determined by the Director to compensate a person injured by an action of the licensee.

_____ I understand if the amount of 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.

_____ I understand that upon satisfactory evidence that there are no outstanding claims against the deposit, a deposit may be refunded by order of the Director 3 years after the date the licensee ceases to be licensed by the NV DMV pursuant to **NRS 482, 487, 490**, or 1 year after the date the licensee ceases to be licensed by the NV DMV pursuant to **NAC 445B**.

_____ I understand pursuant to provisions contained in **NRS Chapters 482, 483, 485, 487, 445B, 597, and NAC 445B**, if I deposit a Savings/Time Certificate with NV DMV, it must be issued by a bank/credit union situated in the State of Nevada and I must provide NV DMV a written letter from the bank/credit union stating the funds in the amount and account indicated above are unavailable for withdrawal except upon order of the NV DMV.

I acknowledge a deposit in lieu of a bond has been placed with the Nevada Department of Motor Vehicles under the terms prescribed by the NV DMV and pursuant to provisions contained in NRS and NAC.

Printed Name and Signature of Business Principal _____ Date _____

State of Nevada County of _____

Subscribed and sworn before me this _____ day of _____

 Notary Public **or** Authorized Nevada DMV Representative

 (Notary Seal)