



GARAGE REGISTRATION INFORMATION

NRS 487.540, 487.550, 487.560 and 487.6871

“Garage” means a business establishment, sole proprietorship, firm, corporation, association, or other legal entity that performs any of the following services on motor vehicles:

- Repair or replacement of the:
 - Engine;
 - Brake System;
 - Transmission System;
 - Drivetrain System;
 - Heating and Air Conditioning System;
 - Cooling System;
 - Muffler and Exhaust System;
 - Electrical System;
 - Electrical Charging System; or
 - Fuel Injection or Carburetion System.
- Engine Tune-up;
- Diagnostic Testing;
- Alignment; or
- Oil Change and Lubrication.

“Garage” does not include a business establishment, sole proprietorship, firm, corporation, association, or other legal entity that does not perform services on motor vehicles for members of the public. **NRS 487.540**

REGISTRATION REQUIREMENTS:

1. Application for Business License (OBL-237) completed in full and signed by a principal of the business.
2. Personal History Questionnaire (OBL-242) completed and signed by each principal listed on the license application.
3. Licensee/Registrant Acknowledgement (OBL-308) completed and signed by each principal listed on the license application.
4. A surety bond (OBL-269) or deposit in lieu of bond in the amount of \$5,000.
5. Non-refundable registration application fee of \$25.00. Vehicle dealers, manufacturers, distributors, rebuilders, automobile wreckers, salvage pools, body shops, authorized inspection stations, and authorized stations are exempt from the issuance or renewal fee of a registration. **NRS 487.560**
6. City or County Business License.
7. Fictitious Firm Name Filing.
8. Copy of Certificate of Incorporation and Corporate filing, with names of the officers, filed with the State of Nevada, Secretary of State’s Office, if applicable.
9. The Federal Identification Number (FEIN) of the business.
10. An electronic mail address for the business.
11. An established place of business within the state.
12. Garage Consumer Bill of Rights – A sign 22 inches by 28 inches stating the customer’s bill of rights as noted in **NRS 487.6871**. The sign must be easily visible in an area within the business, frequented by persons seeking repairs for motor vehicles. Note: The sign shall be created per the specifications contained in the template (OBL-334) provided by the Department.

NOTE: Garages are not subject to registration if they provide repairs only on motor trucks with a gross weight exceeding 10,000 pounds. **NRS 487.550**

Late Fee: A license that expires for failure to renew may be reinstated upon submission to the Department of a completed application for renewal, a renewal fee, and a late fee of \$25.00.



APPLICATION FOR BUSINESS LICENSE AND GARAGE REGISTRATION

State Business License Number _____ DMV License Number _____
(If new applicant, please leave blank)

Individual/Corporate Name _____

DBA Name _____

Mailing Address _____
Street City State Zip Code

Physical Address _____
Street City State Zip Code

Business Phone Number _____ Business Fax Number _____

E-Mail Address _____ FEIN: _____

Reason for Submittal	Business Type	Dealer (Business Activity)	Schools (Business Activity)
<input type="checkbox"/> New Application <input type="checkbox"/> Principal Location <input type="checkbox"/> Branch Location <input type="checkbox"/> Change <i>Mark type of change(s)</i> <input type="checkbox"/> Add Activity <input type="checkbox"/> Remove Activity <input type="checkbox"/> Change of Principal(s) <input type="checkbox"/> Adding <input type="checkbox"/> Deleting <input type="checkbox"/> Change of Business Structure <input type="checkbox"/> Change of Business Address <input type="checkbox"/> Mailing <input type="checkbox"/> Physical <input type="checkbox"/> Change of Curriculum <input type="checkbox"/> Change of Class Schedule <input type="checkbox"/> Change of Email Address <input type="checkbox"/> Change of Business Name _____ Requested Name _____ Previous Name <input type="checkbox"/> Duplicate License	<input type="checkbox"/> Rebuilder <input type="checkbox"/> Manufacturer <input type="checkbox"/> Distributor <input type="checkbox"/> Transporter <input type="checkbox"/> Broker <input type="checkbox"/> Wrecker <input type="checkbox"/> Electronic Notification <input type="checkbox"/> Salvage Pool <input type="checkbox"/> Consignment Auction <input type="checkbox"/> Live <input type="checkbox"/> Internet <input type="checkbox"/> Body Shop <input type="checkbox"/> Class A Certificate Garage Registration <input type="checkbox"/> Garage Number of Technicians _____ Type of Repairs _____ _____ _____	<input type="checkbox"/> Dealer <input type="checkbox"/> New Motor Vehicle <input type="checkbox"/> Used Motor Vehicle <input type="checkbox"/> New Trailer <input type="checkbox"/> Used Trailer <input type="checkbox"/> New Motorcycle <input type="checkbox"/> Used Motorcycle <input type="checkbox"/> Moped <input type="checkbox"/> Long Term Lessor <input type="checkbox"/> Short Term Lessor <input type="checkbox"/> Short Term Tlr Lessor <input type="checkbox"/> Consignment Auction <input type="checkbox"/> Live <input type="checkbox"/> Internet <input type="checkbox"/> OHV Dealer <input type="checkbox"/> New OHV <input type="checkbox"/> Long Term OHV Lessor <input type="checkbox"/> Short Term OHV Lessor <input type="checkbox"/> OHV Manufacturer	<input type="checkbox"/> Drive School <input type="checkbox"/> Behind-the-Wheel <input type="checkbox"/> Classroom <input type="checkbox"/> Correspondence <input type="checkbox"/> Internet <input type="checkbox"/> Minors <input type="checkbox"/> Traffic Safety School <input type="checkbox"/> Classroom <input type="checkbox"/> Correspondence <input type="checkbox"/> Internet <input type="checkbox"/> DUI School <input type="checkbox"/> Classroom <input type="checkbox"/> Correspondence <input type="checkbox"/> Internet Emission Control (Business Activity) <input type="checkbox"/> Emission Station <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Test Only <input type="checkbox"/> Test & Repair <input type="checkbox"/> Fleet, Test Only <input type="checkbox"/> Fleet, Test & Repair

Dealers selling new vehicles must list vehicle makes franchised to sell: _____

☐ Individual ☐ Partnership ☐ LLP ☐ LLC ☐ Corporation Incorporated in State of _____ File Date _____



OWNERSHIP: List name and title of each individual, each partner, whether general or limited, or each principal officer, director or stockholder participating in the direction, control or management of the policy of the business. Use separate page if necessary. Ownership change requires notification to the Department.

Name (Last, First, Middle)	Title

Registered Agent's Information: _____

For Garage Registration Only: Additional Location(s)

Name of Business	Address	Phone Number and Managers Name	# of Technicians

Nevada Revised Statute and Nevada Administrative Code Chapters:

NRS/NAC Chapters 445B & 482	NRS/NAC Chapters 482 & 490	NRS/NAC Chapter 483	NRS/NAC Chapters 487 & 597 (Body Shop & Garage only)
Station and Inspector licensing.	Broker, Dealer, Distributor, Long Term Lessor, Manufacturer, Rebuilder, Salesman, Short Term Lessor and Transporter licensing, including Off-Highway Vehicle Industry Licensing.	Instructor and School licensing.	Body Shop, Garage, Salvage Pool and Wrecker licensing or registration.

I understand providing false information or the omission of the requested information in this application is grounds to deny, suspend, or revoke my business license or registration and constitutes a gross misdemeanor under Chapter 482, 483, 487, 445B and 490 of the Nevada Revised Statutes. Furthermore, I understand it is my responsibility to review the aforementioned Nevada Revised Statute and Nevada Administrative Code Chapters with respect to the license or registration I am applying for and agree to comply with the requirements stated therein. I declare under penalty of perjury that the foregoing is true and correct.

NOTE: TO BE SIGNED BY SOLE OWNER, PARTNER, OR OFFICER OF THE CORPORATION ONLY.

Signatures must be original. Photocopies are not acceptable.

Applicant's Signature Title Date

State of Nevada
County of _____

Subscribed and sworn to before me this _____ day of _____ 20 _____ by _____

Signature of Notary Public or Authorized Nevada DMV Representative

Notary Seal



PERSONAL HISTORY QUESTIONNAIRE

☐ New ☐ Update

This questionnaire is filed as part of the licensing application for:

Business License: ☐ Principal ☐ Registered Agent/Manager

Occupational License: ☐ Salesperson ☐ Drive School Instructor ☐ Traffic Safety School Instructor

☐ Inspector ☐ DUI School Instructor

All lines and spaces must be completed in full. If not applicable enter (N/A).

Full Legal Name: _____

Additional names you have been known by (*maiden name, stage name, nickname*):
Last First Middle

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Home Phone _____ Additional Phone _____

Driver's License No. _____ State _____

Date of Birth _____ Place of Birth _____

Social Security No. - - ☐ Female ☐ Male
City State

Height _____ Weight _____ Hair _____ Eyes _____

Scars, marks, and/or tattoos _____

Employment History for the past 5 years beginning with the most current (*without gaps*):

From (month/year)	To (month/year)	Employer	Complete Address/Telephone #



Applicant's Name _____

Personal History Questionnaire

List names, complete address, and phone numbers of two personal references.

Name	Address	Phone Number

Drive, DUI or Traffic Safety applicants only:

Have you ever been arrested or convicted of a crime or offense, either felony, gross misdemeanor or misdemeanor, including traffic misdemeanor offenses? ☐ Yes ☐ No

All other applicants:

Have you ever been arrested or convicted of a crime or offense, either felony, gross misdemeanor or misdemeanor, excluding traffic misdemeanor offenses? ☐ Yes ☐ No

If "Yes," list separate charge by date of arrest. Describe the offense, court, and disposition in the appropriate columns. If additional space required, use a separate sheet of paper.

Date of Arrest	Nature of Offense	Court of Jurisdiction	Disposition of Offense

Are you currently, or have you ever been under supervision of a parole or probation agency of any state? If so, provide name and address of the agency, name of supervising officer and phone number. Provide a copy of your discharge; if appropriate (*explain*).

Child Support Information:

Nevada Revised Statute 482.319 requires all professional and occupational licensing agencies to request statements regarding child support from applicants for new licenses and for renewal of all occupational licenses. Please mark the appropriate response and complete the remainder of the form. Failure to mark one of the three and completion of the form will result in denial of the application.

- ☐ 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 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 plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.



Applicant's Name _____

Personal History Questionnaire

Have you previously held or do you presently have a business or occupational license issued by the Department of Motor Vehicles in this State or by any other State's occupational licensing authority? ☐ Yes ☐ No

If "Yes", license number _____ State _____

Have you ever had a business or occupational license, in this state or any other state including a driver's license, which was denied, suspended, revoked, or had administrative sanction against it? ☐ Yes ☐ No (if Yes, explain)

I hereby authorize the Department of Motor Vehicles to make any background investigation necessary as it pertains to the issuance of my license. In relation, I authorize any person or entity contacted by the Department of Motor Vehicles, its agents or employees to furnish any information or opinions they may have during the course of my initial background investigation. I release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, Department of Motor Vehicles, its agents or employees and all persons or entities furnishing information or opinions to the Department of Motor Vehicles related to my background investigation. I understand providing false information or the omission of the requested information in this questionnaire is grounds to deny, suspend, or revoke my business or occupational license. Furthermore, I understand filing false information to obtain any license or permit is a criminal act as defined in Nevada Revised Statutes and Nevada Administrative Codes in addition to being subject to the administrative sanctions as prescribed by law.

Signature of Applicant Date _____

Signatures must be original. Photocopies are not acceptable.

State of Nevada

County of _____

Subscribed and sworn before me this _____ day of _____, 20____ by _____

Notary Public **or** Authorized Nevada DMV Representative (Notary Seal)

For Department Use Only

Case No _____

☐ Application completed and signed ☐ Fingerprints ☐ Background Investigation ☐ Total Fees \$ _____

Recommendation: ☐ Approved ☐ Denied

Signature of Employee Date _____

Signature of Supervisor (if applicable) Date _____

Signature of Investigator (if applicable) Date _____



LICENSEE/REGISTRANT ACKNOWLEDGEMENT

Please print or type

I, _____ having made application with the Department of Motor
Name (please print)

Vehicles, for a business or occupational license, acknowledge that I have been provided with the Department website address and directions on how to access the Nevada Revised Statute and Nevada Administrative Code pertaining to the license/registration for which I am applying and have been encouraged to review those laws and rules, since they affect the manner in which my business is conducted.

NRS/NAC Chapter 445B & 482	NRS/NAC Chapter 482 & 490	NRS/NAC Chapter 483	NRS/NAC Chapters 487 & 597 (Body Shop & Garage only)
Station and Inspector licensing.	Broker, Dealer, Distributor, Long Term Lessor, Manufacturer, Rebuilder, Salesman, Short Term Lessor, and Transporter licensing.	Instructor and School licensing.	Body Shop, Garage, Salvage Pool, and Wrecker licensing.

DMV WEBSITE:
dmv.nv.gov

Select Business link for a specific type of license.

NRS/NAC WEBSITE:
www.leg.state.nv.us

Select the appropriate NRS Chapter Link from this website.

Name: _____ DMV Lic. #: _____

Mailing Address: _____
Street City State Zip Code

Physical Address: _____
Street City State Zip Code

Telephone Number: _____ Social Security #: _____ Date of Birth: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____ Gender: _____

I certify under penalty of perjury that all information contained in this application is true and correct. I agree to comply with all NRS/NAC requirements applicable to the license that I am applying for.

Applicant's Signature

Date

DMV Representative's Signature

Date



VEHICLE INDUSTRY BUSINESS LICENSE BOND

Bond Number _____

License Type:

- ☐ Body Shop
☐ Garage

KNOW ALL MEN BY THESE PRESENTS:

That _____, as principal,
(Individual or Corporate Name and Name Doing Business as)

located in the County of _____, State of Nevada, as obligé

and _____, a corporation organized and existing under and by virtue
(Name of Surety)

of the laws of the State of _____, and authorized to transact a surety business in the State of Nevada,
as surety, are held and firmly bound unto the State of Nevada in the penal sum of _____ THOUSAND DOLLARS
For the payment of which well and truly to be made we hereby bind ourselves, our respective heirs, administrators,
Executors, successors and assigns jointly and severally, firmly by these presents:

To be effective on the _____ day of _____, _____

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

WHEREAS the above-named principal has been registered to carry on or conduct in this State business of a
Repair garage or body shop; and

WHEREAS the above-named surety herein agrees that any person injured by the actions of the principal or his
employees involved in any fraud or fraudulent representation or in violation of any of the provisions of **Chapter 487, 597,**
or **598** of the **Nevada Revised Statutes** or **Nevada Administrative Code** may bring action in said injured person's own
name against the said surety. This bond is continuous in form and the total aggregate liability of the bond is limited to the
payment of the total amount of the bond. In the event of a dispute of a claim by the surety company, application may be
made to the Director, Department of Motor Vehicles, for good cause shown. After notice and hearing, the director may
authorize payment of funds from here said surety coverage.

(SEE BACK)

Bond Number _____

This bond may be canceled by the surety at any time by giving written notice by registered mail of its desire and intention so to do. Said cancellation shall be effective thirty (30) days after the receipt of said notice by the State of Nevada Department of Motor Vehicles, Occupational and Business Licensing Section.

Signed, sealed and dates this _____ day of _____, _____

X _____
(Principal's Signature)

(Principal's Printed Name)

(Surety)

Telephone Number of Surety: _____

(Mailing Address of Surety Company, Street)

(City, State and Zip Code)

By _____
(Signature, Attorney-In-Fact for Surety)

(Printed Name, Attorney-In-Fact)

(The Corporate Seal of the Surety Company must be
imprinted or affixed to the bond form)

(Surety Seal)

**GARAGE
CUSTOMER BILL OF RIGHTS
SIGN INSTRUCTIONS AND TEMPLATE**

1. The sign must be at least 22 inches by 28 inches in size.
2. **Boldface** font must be used as indicated on the template.
3. The sign must include a replica of the "Great Seal of the State of Nevada."
 - A. The seal must be 2 inches in diameter.
 - B. The seal must be centered on the face of the sign directly above the words, "STATE OF NEVADA."



STATE OF NEVADA

REGISTERED GARAGE

THIS GARAGE IS REGISTERED WITH THE DEPARTMENT OF MOTOR VEHICLES

NEVADA AUTOMOTIVE REPAIR CUSTOMER BILL OF RIGHTS AS A CUSTOMER IN NEVADA:

YOU have the right to receive repairs from a business that is **REGISTERED** with the Department of Motor Vehicles that will ensure the proper repair of your vehicle. (NRS 487.6871)

YOU have the right to receive a **WRITTEN ESTIMATE** of charges for repairs made to your vehicle which exceed \$50. (NRS 487.6875)

YOU have the right to read and understand all documents and warranties **BEFORE YOU SIGN THEM.** (NRS 487.6871)

YOU have the right to **INSPECT ALL REPLACED PARTS** and accessories that are covered by a warranty and for which a charge is made. (NRS 487.6883)

YOU have the right to request that all replaced parts and accessories that are not covered by a warranty **BE RETURNED TO YOU AT THE TIME OF SERVICE.** (NRS 487.6883)

YOU have the right to require authorization **BEFORE** any additional repairs are made to your vehicle if the charges for those repairs exceed 20% of the original estimate or \$100, whichever is less. (NRS 487.6877)

YOU have the right to receive a **COMPLETED STATEMENT OF CHARGES** for repairs made to your vehicle. (NRS 487.6893)

**FOR MORE INFORMATION, THE COMPLIANCE ENFORCEMENT DIVISION OF THE
DEPARTMENT OF MOTOR VEHICLES CAN BE REACHED AT:**

dmv.nv.gov/ced.htm

Carson City

555 Wright Way, Carson City, NV 89711 (775) 684-4690

Elko

3920 East Idaho Street, Elko, NV 89801 (775) 753-1175

Henderson

1399 American Pacific Drive, Henderson, NV 89074 (702) 486-1371

East Las Vegas

2621 East Sahara Avenue, Las Vegas, NV 89104 (702) 486-4930

West Las Vegas

8250 West Flamingo Road, Las Vegas, NV 89147 (702) 486-8620

Reno

9155 Double Diamond Parkway, Reno, NV 89521 (775) 684-3562