



CITY OF HENDERSON – BUSINESS LICENSE DIVISION COMMUNITY DEVELOPMENT ZONING COMPLIANCE CHECK

DBA/Name of Proposed Business: _____

Applicant/Contact Name: _____

Address of Proposed Business: _____

Suite#: _____

Henderson, NV: _____

Phone: () _____

Cell: () _____

Anticipated Start Date of Business: _____

New Business

Change of Ownership

Business Name Change

Change of Address

1. Concisely describe the specific business activity: _____

2. Does the business use or store hazardous materials/chemicals? Yes No

If YES, applicant must complete hazardous materials questionnaire (available at Community Development).

***Home-Based Business Only:** By signing below, you are acknowledging you have read and will comply with the Home Occupation standards in Section 19.5.7.D.5 of the Henderson Municipal Code. Also, you are acknowledging you are the property owner or have obtained permission from the property owner to operate a home-based business at the above-referenced address. Non-compliance is grounds to revoke the business license.

***Non-Residential Locations Only:** A site plan or building layout that clearly identifies the location the business will be occupying is required for all applications.

**The information provided above
is accurate and correct:**

Applicant Signature

Date

**Final approval by the Community Development Department IS NOT GRANTED
until the items listed below and on-site inspections are completed.**

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

APN		<input type="checkbox"/> Address Verified
Zoning		<input type="checkbox"/> Home-Based Business
Use Classification and Comments	_____ _____ _____	
Check all that are required:	<input type="checkbox"/> Conditional Use Permit # _____ <input type="checkbox"/> Temporary Use Permit # _____ <input type="checkbox"/> Design Review # _____ <input type="checkbox"/> Variance # _____ <input type="checkbox"/> Vehicle Travel Distance # _____ <input type="checkbox"/> Zone Change # _____ <input type="checkbox"/> Pre-Existing Use _____ <input type="checkbox"/> Other _____	
Status:	<input type="checkbox"/> Permitted <input type="checkbox"/> Denied	
	<input type="checkbox"/> Pending: _____	
Checked by:	_____ Community Development	_____ Date
		_____ Applicant Initials