

City of Las Vegas
Building and Safety Department
Land Development Services
333 N. Rancho Drive
Las Vegas, NV 89106

LICENSE AGREEMENT APPLICATION INSTRUCTIONS

1. Per Clark County Recorder requirements, use only black ink on the document and do not write within or stamp within the 1" borders that are on each page.
2. The applicant must return the signed* and **notarized** agreement (copies are not acceptable) with sufficient proof of insurance as described in Section 7 of the Agreement.

***The person signing the document for a company, business, corporation, limited liability company, trust, partnership, etc, must be authorized to sign legal documents for said company, business, corporation, Limited Liability Company, trust, partnership, etc.**

3. **PLEASE NOTE:** If the acceptable License Agreement, insurance and fees are not received within a reasonable amount of time, holds can and will be placed on any permits, inspections, bond releases, civil plan approvals, and/or on the Certificate of Occupancy.
4. Attached is an example of a Certificate of Liability Insurance as required by the City of Las Vegas (see Section 16 of the agreement).
5. City staff will forward your License Agreement Request to the Director of Building & Safety for approval.

If the license agreement is approved, the Agreement will then be forwarded to the City Attorney's Office for approval prior to obtaining the signatures of the City Clerk and Mayor.

After all signatures have been obtained, the document will then be sent to the Office of the Clark County Recorder for recordation. After the document has been recorded City of Las Vegas Land Development Services will send a copy of it to the owner for their records. If the owner's representative would like a copy of the recorded document they can request one by calling the number below.

If you have any questions please call Kelly McCartney-Perone in Building & Safety, at 702-229-3248.

City of Las Vegas
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Land Development Services
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LICENSE AGREEMENT APPLICATION

Owner's Name: _____

Owner's Address: _____

Owner's Phone #: _____

Owner's Email: _____

OWNER'S REPRESENTATIVE

Representative's Company Name: _____

Representative's Contact Name: _____

Representative's Address: _____

Contact's Phone Number/Email: _____

GENERAL INFORMATION

Project Name: _____

Associated civil project # (if applicable): _____

Project Parcel Number/Address: _____

Description of license area: _____

Land Use Entitlements/Planning Case #: _____

Applicant's Signature: _____ Printed Name: _____

Date: _____

PLEASE NOTE

The exhibit(s) must include the following:

North arrow

Vicinity map (street names must be legible)

Typical section with dimensions (must be legible)

Area of encroachment must be clearly defined and include length and width

Do not use font smaller than 10-point

If the encroachment happens to be planters please label the length, width, and depth of each planter along with space between each planter. Please note if grates will be used.

If the encroachment is any type of aerial item such as signage, balconies, etc. include height, width, how far the item(s) will protrude into public airspace, and height from the ground to the bottom of the encroaching item(s)

Everything on the exhibit(s) **MUST** be legible or they will be returned to you to rectify.

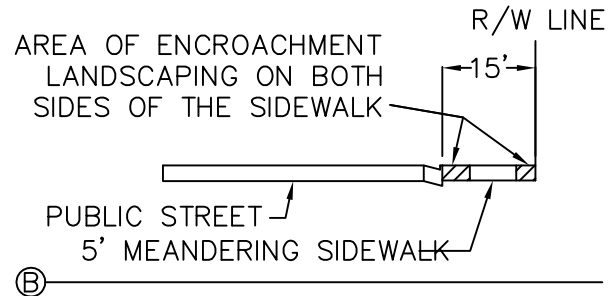
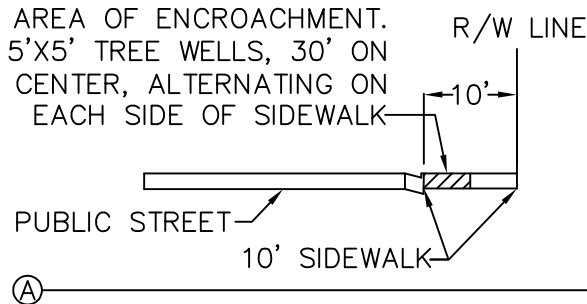
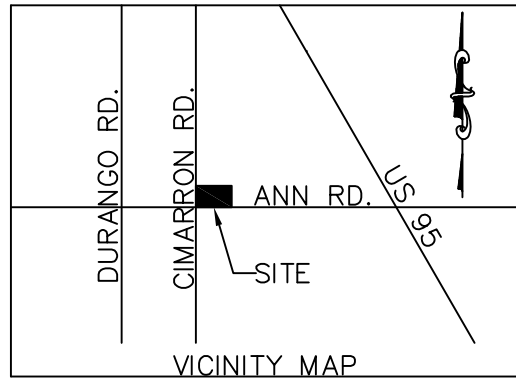
Please remember, you may submit as many exhibits as necessary. You do not have to squeeze everything onto one exhibit.

Attached is an example of an acceptable exhibit.

1 Inch, or Greater, Clear Margin On All 4 Sides per Clark County Recorder's office.

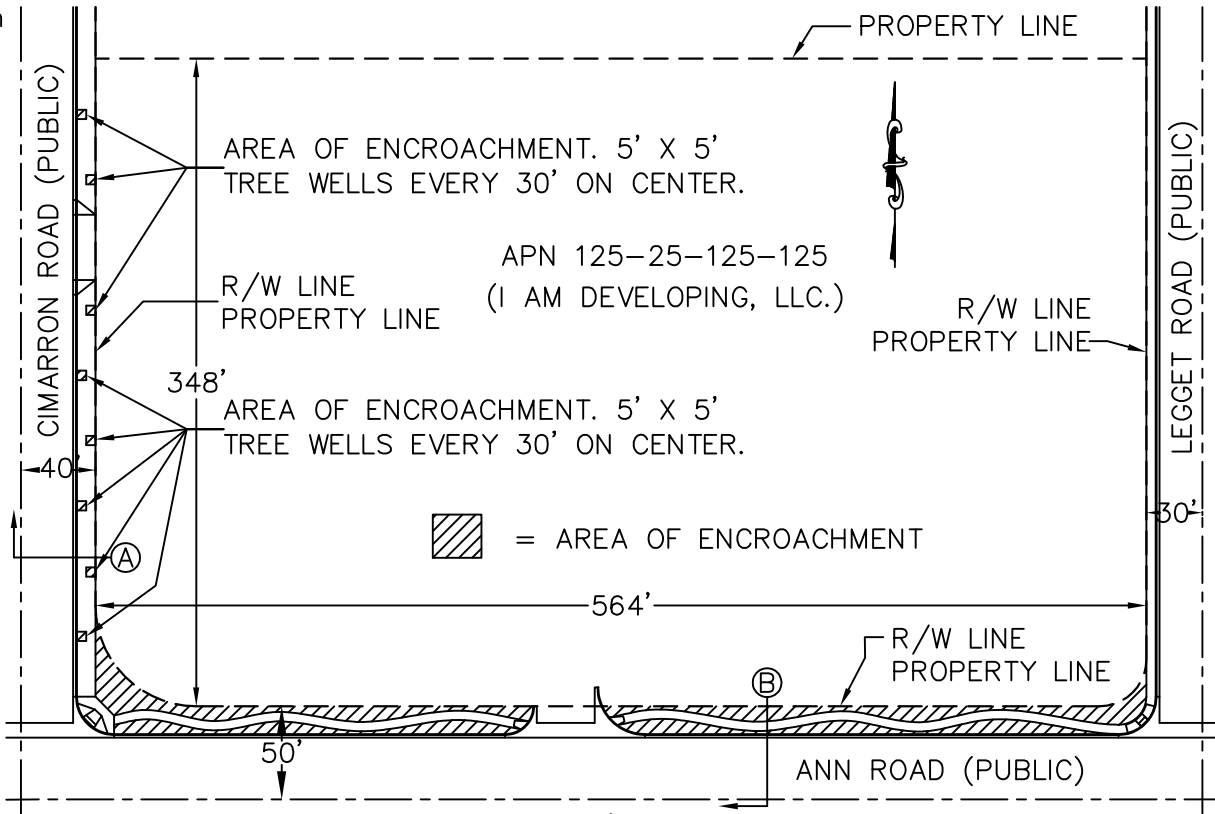
NOTES

1. ALL INFORMATION CAN BE COPIED WITHOUT DATA LOSS.
2. ALL FONTS 10 POINT ARIAL OR LARGER.
3. ALL DIMENSIONS, PROPERTY LINES, LIMITS OF R/W, AND AREAS OF ENCROACHMENT CLEARLY LABELED & DISPLAYED.
4. FOCUS IS THE ENCROACHED RIGHT OF WAY, NOT THE DEVELOPING PROJECT.



1 Inch or Greater Clear Margin

1 Inch or Greater Clear Margin



1 Inch, or Greater, Clear Margin On All 4 Sides per Clark County Recorder's Office.

Phone: 702-555-1212 FAX: 702-555-1212

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
ABC123456

PRODUCER

Doe Insurance Company
555 North Smith Avenue
East Las Vegas, NV 89000

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

COMPANY A	Jones Insurance Company
COMPANY B	N/A
COMPANY C	
COMPANY D	

INSURED

Big Homes, Incorporated
9999 Green Street
South Las Vegas, NV 89001

COVERAGES

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	ZZZ123456789	07/01/06	07/01/07	GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 1,000,000
					PERSONAL & ADV INJURY \$ 1,000,000
					EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$
					AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$
					EL EACH ACCIDENT \$
					EL DISEASE-POLICY LIMIT \$
					EL DISEASE-EACH EMPLOYEE \$
	OTHER				

EXAMPLE

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: Encroachment Agreement for (the location and name of your project goes here).
Certificate Holder is included as Additional Insured.

CERTIFICATE HOLDER

City of Las Vegas
Land Development
333 N Rancho Drive
Las Vegas, NV 89106

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

BY: Jane Smith

Jane Smith
VALID AS OF: 07/21/06