

CITY OF LAS VEGAS DEPARTMENT OF COMMUNITY DEVELOPMENT BUSINESS LICENSING DIVISION

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Privilege License Application: PART I - Financial Questionnaire

Notice to Applicant: Please read this form carefully and furnish all related documents. Answers must be complete and truthful. Do not leave any spaces blank. Answer "N/A" to any question that is not applicable. Failure to properly complete the form and provide required accompanying documents could result in a delay processing the application or in a denial of the license. The Department reserves the right to request additional documents as necessary in order to conduct its background investigation. Must be submitted with a General License Application and PART II - Personal History Questionnaire. Name of Applicant (Operating Entity) Business Name (As it should appear on the license) Business Address (with city, state, zip) Mailing Address (with city, state, zip) Business Telephone (with area code) 1. Name of owner(s) of property where business will be conducted: 3. Will property owner share in profits of the business or otherwise participate in operations?: ☐ Yes ☐ No 4. Ownership (Provide information for all individuals or entities that have an ownership share in this business. The form must account for 100% of the capital invested in this business. If additional space is required, please use additional form. For LLCs, limited partnerships, or publicly traded corporations with numerous minor investors, individual ownership interests of less than 1% may be grouped as one line item, provided an explanation is supplied below. Use additional sheets as necessary. Provide stock certificate or other legal proof of ownership for each entity or individual listed below). Name & Title of Owner Address & Telephone Owner Percentage Amount Total Capital Invested: 100%

Applicant/Preparer Initials

5. Does the business own or control any assets or liabilities outside the Unit page.)	ed States? (f yes, furnish details and/or support	ing documentation on a separate
	Yes	☐ No	
6. If a publicly traded corporation, has this business ever been investigated	by the SEC?	(If yes, please provide date, details,	and sanctions, if any.)
	Not ap	plicable - Not publicly traded	Yes No
7. Were there any litigations to which the company was a party over the pas number, other parties to suit, nature of suit, date of disposition. Provide cop disposing of each matter.)			
	Yes	☐ No	
8. Are there any current or future agreements that would result in an owners subscription agreements, issued stock options, profit sharing plans, etc.)?	ship share in	the company being obtained by ano	ther individual or entity (stock
	Yes	☐ No	
Please note that additional document	s may be	required during the invest	igation.

Applicant/Preparer Initials _____/___

9. Source of Funding and Expenditures

A. Source of All Funds (Provide Documented Evidence Where Applicable)

A. Source of All Funds (Provide Documented Evidence where Applicable)	
Personal or Corporate Funds: Attach schedule showing each person/entity and amounts invested. Also provide bank statements or other documents showing source where money is held:	
Loans from lending institutions: Attach copies of all loan agreements:	
Cash Borrowed, Gifted or Loaned from a Personal Source: Attach a schedule of name, relationship and amount:	
Sale of Property:	
Source of Money kept at home: Provide explanation where money came from:	
Deferred Contracts (Promissory Notes):	
Reimbursed leasehold, tenant improvements or construction allowance:	
Other:	
Total Funds \$	
B. Expenditures & Other Disposition of Funds Prior to Opening:	
Business Purchase Price (provide copy of purchase agreement):	
Land:	
Buildings (include construction, repair, and/or remodel costs):	
Property Lease payments and deposits:	
Leasehold Improvements:	
Fixtures & Equipment:	
Inventory and Supplies:	
Prepaid Expense (insurance, etc.):	
Legal, accounting and consulting expenses:	
Advertising expense:	
Salary Expense:	
Interest Expense	
Government fees and Taxes (permits, bonds, license fees and/or taxes paid to government agencies):	
Other Expenses:	
Total Expenditures \$	
C. Cash Available for operation (A minus B):	