



NEVADA STATE CONTRACTORS BOARD

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www.nscb.nv.gov

APPLICATION FOR CHANGE IN BUSINESS NAME

1. **Please type or print in ink when completing this form.**
2. **Make sure this application is properly signed by an existing principal on the license.**
3. **Include the required application fee of \$250.00.**
4. **Read all instructions carefully.** The Board desires to provide courteous and timely service to all applicants. To maximize its efficiency and the level of service, the Board will process complete applications only. **A complete application includes all applicable supporting documents and fees. The Board will not act as your agent in gathering information or supporting documents necessary for the consideration of your license application. Incomplete applications will be returned to you.**
5. **Leave no space blank.** If a particular question or request for information does not apply to you, put "NA" in the blank space to indicate the question has received your attention.
6. **Note:** *This application cannot be used to change your business entity.* If, for example, you have changed from a sole proprietorship to a corporation, or your business entity has been affected by a merger, you must apply for a new license.

SECTION 1

Which name is changing (select all that apply):

- Legal Business Name
 Fictitious Firm Name (dba)

License Number: _____ (If different fictitious names are requested, a separate application is required for each).

Please note: Each license number is limited to one fictitious name.

SECTION 2

Legal Business Name: List the name as it **currently** appears on your license (as applicable).

Current Legal Business Name: _____
(Inc, LLC, GP, LP or Sole Proprietor)

Current Fictitious Firm Name (dba): _____

SECTION 3

List the legal business name requested. This is the name that will appear on the license and is the actual name under which the contracting business will be conducted.

Requested Legal Business Name: _____
(Inc, LLC, GP, LP or Sole Proprietor)

Requested Fictitious Firm Name (dba): _____

Name Similarity: *To determine if another contractor is using a similar name, please visit our website and use our search by contractor name feature. If the Board determines that a licensed contractor is using a similar business name, you will be asked to choose a different name.*



SECTION 4

Attach the applicable supporting documentation required by your business entity type.

Corporation: If your registered corporate name has changed, attach a copy of the amended articles of incorporation which have been filed with the Nevada Secretary of State.

If you are currently using a fictitious firm name (dba) and are changing that name, or have registered a new fictitious firm name, attach a recorded copy of the certificate of fictitious firm name.

Limited Liability Company: If your registered name has changed, attach a copy of the amended articles of organization which have been filed with the Nevada Secretary of State.

If you are currently using a fictitious firm name (dba) and are changing that name, or have registered a new fictitious firm name, attach a recorded copy of the certificate of fictitious firm name.

Limited Partnership: If your registered name has changed, attach a copy of the amended limited partnership agreement which have been filed with the Nevada Secretary of State.

If you are currently using a fictitious firm name (dba) and are changing that name, or have registered a new fictitious firm name, attach a recorded copy of the certificate of fictitious firm name.

General Partnership: Attach a copy of your amended partnership agreement and a recorded copy of the certificate of fictitious business name.

Sole Proprietorship: Attach a recorded copy of the certificate of fictitious firm name.

SECTION 5

I am authorized to sign this Affidavit and Release Authorization on behalf of the applicant described and identified in this application.

To the best of applicant's knowledge, the information contained in the application and its supporting documents are free of fraud, misrepresentation, or omission of material fact. To the best of applicant's knowledge, the information contained in the application and its supporting documents are truthful, correct, and complete.

Applicant will ensure that any information subsequently submitted to the Board in conjunction with this application or its supporting documents meet the same standard as set forth above.

Applicant understands that this application will be classified as a public record and will be available for inspection by the public, except with regard to the release of information classified as confidential pursuant to NRS 624.110.

Applicant understands that the Nevada State Contractors Board has the authority to conduct appropriate background investigations for the purpose of verifying all statements and facts represented in this application and supporting documentation.

Signature Requirements: A principal of the applying company must sign this application.

By: _____
(Signature)

Title: _____

(Print Name)

Date: _____

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date Received: _____ Amount: _____ Receipt #: _____ File No.: _____
Withdrawn Date: _____ Reason: _____ Application No.: _____
Approved: _____ Denied: _____
Transaction Closed: Date: _____ Entered By: _____

