

STATE FIRE MARSHAL DIVISION

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FIRE EXTINGUISHER RETAIL SALES LICENSE APPLICATION

****Please use the Tab Key****

New Application Renewal Application

*This application must be accompanied by a **\$31.00 non-refundable fee**. A separate application and fee for a license must be submitted for each business location. Complete answers must be given to all questions.*

Store Name and Number:			
Address of Store:			
City:	State:	Zip:	Email:
Business Telephone:		Business Fax:	

Applying to do Business as: Individual Partnership Corporation LLC

FIRE EXTINGUISHERS MARKETED

Manufacturer(s)	Model Number(s)	Size(s)

If additional space is needed, attach a separate sheet of paper.

Which of the following agencies have approved these extinguishers? The information is found on the extinguisher's label.

Underwriters Laboratories Factory Mutual – FM U.S. Coast Guard – USCG Other: _____

Submitted by Name & Title:			
Address:			
City:	State:	Zip:	Telephone:
Email:			Fax Number:

I understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of the license.

Secretary of State Business License Number: NV _____

Tax Identification Number: _____

