



Department of Business License

JACQUELINE R. HOLLOWAY
DIRECTOR

500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR
P.O. BOX 551810
LAS VEGAS, NEVADA 89155-1810
(702) 455-4252
(800) 328-4813
FAX (702) 386-2168
http://www.ClarkCountyNV.gov/business_license

APPLICATION FOR PERMIT
for
Rock Musical Concert

Date: _____

Business Name: _____

Business Address: _____

Name of Performing Group(s)	Name & Address of Agent(s)

Date of Concert: _____ **Time:** _____ **To:** _____

Location of Concert: _____

Estimate of number of persons expected to attend: _____ **Admission Prices:** _____

NOTE: The fee for this permit shall be \$400.00

Printed Name of Applicant **Title**

Signature

Permit # _____ **TEM-T**

License # _____

Application Received by

Approved by **Date**