

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF LABOR COMMISSIONER

www.labor.nv.gov

1818 COLLEGE PARKWAY, SUITE 102
CARSON CITY, NEVADA 89706
775-684-1890

3300 WEST SAHARA AVENUE, SUITE 225
LAS VEGAS, NEVADA 89102
702-486-2650

**PROFESSIONAL EMPLOYER ORGANIZATION (PEO)
CLIENT INITIATION OR TERMINATION FORM**

“A PROFESSIONAL EMPLOYER ORGANIZATION (PEO) SHALL WITHIN 30 DAYS IN INITIATION OR TERMINATION, NOTIFY THE DEPARTMENT OF BUSINESS AND INDUSTRY OF BOTH THE INITIATION AND TERMINATION OF THE COMPANY’S RELATIONSHIP WITH ANY COMPANY”.

Submit this completed form to the following:

State of Nevada, Office of the Labor Commissioner
1818 College Parkway, Suite 102
Carson City, NV 89706
PEL@labor.nv.gov

Professional Employer Organization – License Number: OLC-

Name of Company:

Address of Company:

City, State, Zip Code:

Contact Person:

Client Company Information:

Initiation

Termination

Name of Company:

Address of Company:

City, State, Zip Code:

Contact Person:

Federal Tax ID:

Contact number:

Date Leasing Arrangement Entered Into:

Date Terminated:

1st Employee within the state hired:

Last Employee within the state terminated:

Client still active with PEO? Yes: No:

Date form completed:

ATTACHED ARE THE REQUIRED DOCUMENTS FOR EACH **NEW** CLIENT:

- Certificate of Insurance
- Proof of a DETR report (State of Nevada Dept of Employment Security)