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

www.labor.nv.gov

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PROFESSIONAL EMPLOYER ORGANIZATION (PEO) CLIENT INITIATION OR TERMINATION FORM

"A PROFESSIONAL EMPLOYER ORGANIZATION (PEO) SHALL WITHIN 30 DAYS IN INITIATION OR TERMINATION, NOTIFIY 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: Termination Initiation Client Company Information: Name of Company: Address of Company: City, State, Zip Code: Contact Person: Contact number: Federal Tax ID: 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)