SMALL BUSINESS IMPACT STATEMENT QUESTIONNAIRE LCB FILE NO.

Name: _____

Date: _____

Organization: _____

NRS 233B.0382 "Small Business defined." "Small business means a business conducted for profit, which employs fewer than 150 full-time or part-time employees.

1. How many employees are currently employed by your business?

_____ Less than 150 employees

_____ 150 employees or more

If you have more than 150 employees, you will not need to answer the rest of the questions. Please mail or email your questionnaire to the above address. If less than 150 employees, please continue with the remaining questions.

2. Will a specific proposed regulatory provision have an <u>adverse economic effect</u> upon your business? If so, please indicate the estimated dollar amount(s) you believe the adopted regulations will cost you over one calendar year with a brief explanation as to how the dollar amount was calculated.

Yes, the regulation will have an adverse economic effect on my business.

_____ No, the regulation will not have an adverse economic effect on my business.

Explanation:

3. Will the regulation have any **beneficial economic effect** upon your business? If so, please indicate any beneficial effects or cost savings you believe the adopted regulations will save you over one calendar year with an estimated dollar amount.

Yes, the regulation will have a beneficial effect on my business.

_____ No, the regulation will not have a beneficial effect on my business.

Explanation:	
Do yo	u anticipate any indirect adverse effects upon your business?
	Yes, the regulation will have an indirect adverse effect on my business.
	_ No, the regulation will not have an indirect adverse effect on my business.
Explai	nation:
Do yo	u anticipate any indirect beneficial effects upon your business?
	_ Yes, the regulation will have an indirect beneficial effect on my business.
	No, the regulation will not have an indirect beneficial effect on my busines
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Explai	nation: