

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION
3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102
(702) 486-4033 / realest@red.nv.gov / <http://red.nv.gov/>

EXPERIENCE VERIFICATION FOR A NEVADA PROPERTY MANAGER
NRS 645.6055

FORM MUST BE COMPLETED BY VERIFYING BROKER.

- 1. Name of Permit holder:** **Permit Number:**
State of issuance:
- 2. Employment History:** ☐ Full-time ☐ Part-time
- 3. Employment Dates:**
- | | | |
|--------------------|--|--------------------|
| From | | to |
| From | | to |
| From | | to |
| Month / Day / Year | | Month / Day / Year |

Multiple lines may be used for breaks in employment with same broker and company only.

4. Broker Declaration:

This is to verify that I, _____, am/was the real estate broker for the company
named: _____

(check the boxes that apply)

- ☐ I am/was the real estate property manager. Permit Number: PM.
- ☐ I authorized _____, permit number PM. _____, as the designated
property manager located at: _____

Under penalty of perjury, I declare that the foregoing is true and correct.

Print Name: _____ Signature of Broker: _____