

**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION**

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EXPERIENCE VERIFICATION FOR A NEVADA BUSINESS BROKER

FORM MUST BE COMPLETED BY VERIFYING BROKER.

1. **NAME OF PERMIT HOLDER:** _____
Permit Number: _____ State of Issue: _____

2. **EXPERIENCE HISTORY:** Full-time Part-time

3. **DATES OF EXPERIENCE:**

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:** I, (please print your name) _____

being first duly sworn by oath, say that, I am/was the real estate broker for the company named :

(check the boxes that apply)

I am/was the real estate business broker. Permit number BUSB. _____
 I authorized _____, permit number BUSB. _____,
as the designated business broker located at: _____

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

(Print name)

X

(Signature of broker)

5. **NOTARY:**

ss. STATE OF _____
COUNTY OF _____

This instrument was acknowledged before me on _____ *by* _____
(date) (person presenting document)

X _____ (seal)
(Signature of Notarial Officer)