

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

3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102 * (702) 486-4033
e-mail: realest@red.nv.gov * <http://red.nv.gov/>

ENERGY AUDITOR CHANGE

COMPANY NAME CHANGE, COMPANY ADDRESS CHANGE, and PERSONAL NAME CHANGE

INSTRUCTIONS and FEE:

- a) Fee \$20.00 per section required. Cash in exact change; check or certified funds, made payable to the NRED, are accepted.
- b) **Attach the original certificate to this form.**
- c) **Attach any other proof required noted in a specific section below.**

*Only information deemed by law to be confidential shall be confidential (SSN, exam results). Most information provided by an applicant for licensure is public information and must be provided upon request. By policy, the Real Estate Division shall post (via the web site) and sell licensee lists which include the licensee's name, business address (even if same as home address), and business telephone number.

FEE \$20.00

1. Date: _____ Certificate #: **EA.** _____

Name: _____ Phone #: _____
(First and Last) *Include area code*

Home address:* _____

Mail address:* _____

(Please do not complete this form for personal address updates. Email your personal address and license number to realest@red.nv.gov)

2. COMPANY NAME AND/OR ADDRESS CHANGE: a) Attach the "Location of Records" Form 664. b) Any change of company name must provide proof of E/O and General liability insurance. The insurance binder must include the new company and your personal name as the insured.

Company Name: _____

Address: _____
(No. & Street, City, State, Zip Code)

Mailing Address (if applicable): _____
(P O Box, City, State, Zip Code)

Telephone number: _____ Email address:* _____

3. PERSONAL NAME CHANGE: Provide proof; such as a copy of a marriage certificate; divorce decree; or court order.

From: _____
(First and Last)

To: _____
(First and Last)

APPLICANT SIGNATURE:

NO **YES** Have you had any disciplinary sanctions imposed by any regulatory agency or commission within the past 5 years?

If **Yes**, applicants are required to attach a written explanation and the final disposition document.

Original Signature: _____ **Date:** _____

**REPORT OF EXISTENCE OF NEVADA BUSINESS LICENSE
Pursuant to NRS 645D**

All applicants MUST complete this section. Please select ONE option.

I have a Nevada business license number assigned by the Nevada Secretary of State upon compliance with the provisions of NRS Chapter 76.

My Nevada business license number is: _____

I have applied for a Nevada business license with the Nevada Secretary of State upon compliance with the provision of NRS Chapter 76 and my application is pending.

I do NOT have a Nevada business license number.

The Real Estate Division is not the arbiter of determining whether the applicant needs a business license. Information about the Nevada business license can be found on the Secretary of State's website at: <http://nvsos.gov/>

Division Use only:

Receipt # _____ Initials _____ Date _____