

**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](mailto:realest@red.nv.gov) / <http://red.nv.gov/>

**BUSINESS NAME REQUEST FOR BROKERS ONLY**

You may return this form via fax to (702) 486-4275.

I WISH TO SUBMIT THE FOLLOWING BUSINESS NAMES FOR APPROVAL:

*(Please Print)*

1.

2.

First Name:

Middle Name:

Last Name:

License Number:

Phone Number:

Email Address:

Fax Number:

Address (Number and Street):

City:

State:

Zip Code:

Signature:

Date:

**FOR DIVISION USE ONLY**

1<sup>st</sup> Name Approved:     Yes     No

2<sup>nd</sup> Name Approved:     Yes     No

Approved By:

Date:

**Your business name is reserved for 90 days from approval date, shown above.**