

**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/>

ASSET MANAGEMENT COMPANY REGISTRATION INSTRUCTIONS

- FEE:** Attach a check or certified funds made payable to the Nevada Real Estate Division or cash in the exact amount for \$2515.00 (\$2000 application fee plus \$500 initial registration fee plus \$15 technology fee). **In compliance with Senate Bill 276, effective August 1, 2021, the Division will be instituting a \$15 technology fee on all original applications.**

- LICENSE REVIEW:** Attach your written procedure which sets forth the company's process to verify that each employee or independent contractor that performs services as directed by the asset management company or an asset manager employed by or under contract with the asset management company is the holder of a license or permit in good standing in the State of Nevada to perform the services for which the asset management company will use the employee or independent contractor.

- PROCEDURE REVIEW:** Attach your written procedure which sets forth the company's process to review the work of each independent contractor that performs services as directed by the asset manager employed by or under contract with the asset management company to ensure that those services are conducted in accordance with all applicable laws and regulations of the State of Nevada.

- PROOF OF INSURANCE:** Attach proof that the company is covered under a policy of insurance or possesses means to act as a self-insurer sufficient to reimburse real property owners for, without limitation, any damage to real property in foreclosure, the wrongful disposal of property or wrongful eviction.

- ADDITIONAL FORM:**
[665A](#): Registration of an Asset Management Company Principal

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ASSET MANAGEMENT COMPANY REGISTRATION FORM

Fee: Please make check, money order, or cashier's check payable to NRED or exact cash for \$2515.00.

1. COMPANY NAME:

FID (Required):

Main Location Address:

City: State: Zip Code:

Mailing Address:

City: State: Zip Code:

Phone Number: Fax Number:

Email Address:

If the applicant is a natural person, also complete Form 665A. Each person who has an interest in the Asset Management Company as a Principal, General Partner, Director, Officer, Trustee, Manager, or registered agent must complete Form 665A as well.

2. BRANCH OFFICE: Any office other than a principal office from which the company will conduct business within the State of Nevada. List branch offices below or check the No Branch offices box: **No Branch Offices**

a. Address:

City: State: Zip Code:

b. Address:

City: State: Zip Code:

c. Address:

City: State: Zip Code:

Attach additional page if necessary.

Division Use Only

Registration Number: Issued Date: Processor Initials:

Date: Receipt Number: Processor Initials:

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3. QUALIFIED EMPLOYEE: A Principal, General Partner, Director, Officer, Trustee, Manager, or Registered Agent who is designated to act on behalf of the company.

Name:

Title:

Business Address:

City:

State:

Zip Code:

4. COMPANY QUESTIONS: Please make an indicator next to **questions a-e**. For any answer of yes, provide a copy of the judgment or order and a written statement explaining the circumstances surrounding the legal issue(s).

- a.** Has the Asset Management Company ever had any judgments entered against the company? Yes No
- b.** Has a receiver been appointed to take control of any assets of the Asset Management Company? Yes No
- c.** Does the Asset Management Company have a process in place to verify that each employee or independent contractor providing your company services on property located in the State of Nevada holds a current and active license or permit in the State of Nevada? Yes No
- d.** Does the Asset Management Company have procedures in place to ensure that services performed on property located in the State of Nevada are conducted in accordance with all applicable laws and regulations of the State of Nevada? Yes No
- e.** Does the Asset Management Company maintain a detailed record of each asset management service request and the contractor who fulfilled the request? Yes No

5. List of Principals, General Partners, Officers, Directors, Trustees, Managers, and/or Registered Agent. Each individual listed must complete Form 665A. Attach an additional page if needed.

- | | | |
|-----------------|--------|-----------|
| a. Name: | Title: | Position: |
| b. Name: | Title: | Position: |
| c. Name: | Title: | Position: |
| d. Name: | Title: | Position: |
| e. Name: | Title: | Position: |

6. DECLARATION: Signature of applicant (NRS 53.045)

I, (print name) _____ hereby, under penalty of perjury, declare that the answers contained in this application are true and correct; and that the Asset Management Company named herein, will faithfully comply with all the statutes and regulations of the State of Nevada pertaining to the conduct of asset management in accordance with the State of Nevada statutes and regulations and Senate Bill 314 (2011 Legislative session).

Signature:

Position:

Date:

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7. **NEVADA RESIDENT?** Yes No

If NO, complete the Consent to Service of Process, Form 656.

REPORT OF EXISTENCE OF NEVADA BUSINESS LICENSE
Pursuant to NRS 645H

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/>