

STATE OF NEVADA



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

3300 W. Sahara Avenue, Suite 350  
Las Vegas, Nevada 89102  
(702) 486-4036 Fax: (702) 486-4067  
Email: [teralyn.lewis@red.nv.gov](mailto:teralyn.lewis@red.nv.gov)  
<http://red.nv.gov/>

**Public Record Request Pursuant to NRS 239**

PRINT LEGIBLY OR TYPE ALL INFORMATION

**Instructions:**

All requests must be made in writing and signed.

**Section A-Requester Information**

Your Name

Phone  Fax  Email

Mailing Address

City  State  Zip Code

**Section B-Record(s) Requested**

Describe the record(s) you are requesting. Please be as specific as possible and include enough detail to assist Division staff in locating the record(s). Include relevant dates or date range. For multiple records, you may attach additional pages.

**Section C-Receiving Record(s)**

Please specify the preferred method of receiving the requested record(s).

- By postal mail at the mailing address above
- Electronic format: By email at the email address above or a flash drive/CD mailed to requestor's mailing address. Please note: If you choose to receive the records by electronic format there will be a per page cost if the document is not available electronically.
- Will pick up in person from Division office

I understand that copying and other associated fees may apply and that records will not be released until payment is received. You will be given an estimate of the charges prior to copying.

\_\_\_\_\_  
Requester Signature-Required Date \_\_\_\_\_

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**DIVISION STAFF USE ONLY**

Date Received: \_\_\_\_\_

Estimate  
An estimate of \$ \_\_\_\_\_  
Amount

provided on \_\_\_\_\_  
Date

by \_\_\_\_\_  
Division Staff

Request Status:

Information provided and  
request completed \_\_\_\_\_  
Date

Information not provided

Request withdrawn  
\_\_\_\_\_ Date

Payment Received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_