

For Division use only:      Date request received: \_\_\_\_\_      Received by: \_\_\_\_\_  
Date request completed: \_\_\_\_\_      Completed by: \_\_\_\_\_

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

**REQUEST FOR RECORD OF COMPLAINTS**

**Requestor Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone No.** \_\_\_\_\_      **E-Mail:** \_\_\_\_\_

**Fax No.** \_\_\_\_\_      **Other:** \_\_\_\_\_

**Reason for request:** \_\_\_\_\_

**Requestor License No.** (If applicable): \_\_\_\_\_

**Subject of Request:**

**Name:** \_\_\_\_\_      **License No.** \_\_\_\_\_

(Real estate licensee, property manager, appraiser, business broker, home inspector, asset manager)

**Name of Company:** \_\_\_\_\_

Please submit one form per licensee.

The information provided will not go beyond the scope of NRS 645.620 or NRS 645C.220(1). If you require information beyond that scope, you may be required to obtain a court order pursuant to NRS 645.180(2) and 645C.220(2).

The Division may take up to five (5) working days to complete this request. If you have not received a response within five days, please contact the Compliance Section at 702-486-4324.

I have read and understand the foregoing information regarding my request.

\_\_\_\_\_

Signature of Requestor

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