



**STATE OF NEVADA
DIVISION OF MORTGAGE LENDING
PUBLIC RECORDS REQUEST**

Attention:
Public Records
Officer

Deliver, Mail, Fax or E-mail to:
3300 West Sahara Avenue, Suite 285, Las Vegas, NV 89102
Fax: 702-486-0785 E-mail: mldinfo@mld.nv.gov

Date of Request	
Name:	
Organization:	
Address:	
City, State, Zip:	
Phone:	
E-mail:	

Records Requested:	
Check one: <input type="checkbox"/> Paper copies <input type="checkbox"/> Electronic copies <input type="checkbox"/> Certified copies <input type="checkbox"/> Inspection (in person)	
<i>Please be specific and include as much detail as possible regarding the records you are requesting.</i>	

<i>The Division will need the following information:</i>			
<input type="checkbox"/> I will pick up	<input type="checkbox"/> Please FedEx <i>Fed Ex billing number:</i>	<input type="checkbox"/> Please send USPS <i>Note: Recipient will be charged actual postage per NRS 239.052</i>	<input type="checkbox"/> E-mail (if format allows)

Statement	
<input type="checkbox"/> I understand there is a charge for copies of public records. NOTE: The Fee Schedule is listed on the Division website at www.mld.nv.gov .	
Requestor Signature	Signature (Type Name for online submission)

Office Use Only

Request status:	Estimate:																			
<table style="width: 100%;"> <tr> <td style="width: 15%; text-align: center;">Date</td> <td style="width: 85%;">Request received</td> </tr> <tr> <td>_____</td> <td>Receipt acknowledgement issued</td> </tr> <tr> <td>_____</td> <td>Request filled</td> </tr> <tr> <td>_____</td> <td>Estimated completion</td> </tr> <tr> <td>_____</td> <td>Estimate provided</td> </tr> <tr> <td>_____</td> <td>Request denied in whole</td> </tr> <tr> <td>_____</td> <td>Other:</td> </tr> </table>	Date	Request received	_____	Receipt acknowledgement issued	_____	Request filled	_____	Estimated completion	_____	Estimate provided	_____	Request denied in whole	_____	Other:	<table style="width: 100%;"> <tr> <td style="width: 60%;">Estimate: \$ _____</td> </tr> <tr> <td>Date deposit received _____</td> </tr> <tr> <td>Actual (if different): \$ _____</td> </tr> <tr> <td>Date final payment received _____</td> </tr> <tr> <td>Completed by _____</td> </tr> </table>	Estimate: \$ _____	Date deposit received _____	Actual (if different): \$ _____	Date final payment received _____	Completed by _____
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<i>Retain request form for 90 days following completion of request.</i>																				