State of Nevada Department of Business and Industry Real Estate Division

Verification of Fingerprints Submitted

The fingerprints of the named applicant have been taken and forwarded electronically to the Central Repository for Nevada Records of Criminal History.

Name (Please Print):		
Date of Birth (Mo/Day/Year):		
Last Four Digits of Social Security No	umber:	
Home Address:		
City:	State:	Zip:
Phone# (Include Area Code):		
Type of License (check one):		
Real Estate (Broker, Broker-sales Broker)-NRS 645.355 Appraisal (Residential, Certified Appraisal Management Company Timeshare Sales Agent-NRS 119 Community Manager/Reserve Str Energy Auditors/Inspector of Str Asset Manager-NRS 645H.530 Asset Management Company-NF By this signature, I authorize my finger History Repository and the Federal Br report.	Residential, Certified y-NRS 645C.650 PA.210 udy Specialist-NRS 1 uctures (General, Res RS 645H.480 erprints to be sub	General or Intern)-NRS 645C.650 16A idential, Master)-NRS 645D.180 mitted to the Nevada Criminal
Signature		Date
For	r Office Use Only	
Date Prints Submitted:		
Processed by:		FINGERPRINTING EXPRESS

Official form of the Nevada Real Estate Division approved for use by Fingerprinting Express. Effective: March 20, 2006

Rev: September 19, 2019