

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION

2501 East Sahara Avenue, Suite 102 * Las Vegas, NV 89104-4137 *(702) 486-4033
[email: realest@red.state.nv.us](mailto:realest@red.state.nv.us) www.red.state.nv.us

MAILING LIST (CD ROSTER) REQUEST

INFORMATION

Mailing lists (rosters) are available for purchase from the Real Estate Division, Education section on CD-ROM in Excel format.

When ordering, please note the following:

- The CICCH (homeowners' association) and AMC (Appraisal Management Company) roster will include the management company's telephone number or the telephone number provided for the association/company. Email addresses will not be provided.
- All other rosters will provide authorized mailing addresses only without phone numbers or email addresses.
- All fees are non-refundable.
- Please allow up to two weeks from receipt for processing & mailing.

Please send completed form and check or money order to:

State of Nevada
Real Estate Division
2501 East Sahara Avenue, Suite 101
Las Vegas, NV 89104

SHIPPING INFORMATION

Ship To: _____

Attention: _____

Mailing Address: _____

City, State, Zip: _____

Contact Person: _____ **Phone #:** _____

ROSTER REQUEST

Please check one or more of the following:

- | | |
|------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Broker (\$25.00) | <input type="checkbox"/> Appraiser (\$25.00) |
| <input type="checkbox"/> Broker Salesperson (\$25.00) | <input type="checkbox"/> Inspector of Structures (\$25.00) |
| <input type="checkbox"/> Salesperson (\$25.00) | <input type="checkbox"/> CIC Homeowners Association (\$25.00) |
| <input type="checkbox"/> Property Manager (\$25.00) | <input type="checkbox"/> Community Manager (\$25.00) |
| <input type="checkbox"/> Business Broker (\$25.00) | <input type="checkbox"/> Timeshare Agent (\$25.00) |
| <input type="checkbox"/> Appraisal Management Company (\$25.00) | |

TOTAL: \$ _____



FOR NRED INTERNAL USE ONLY

Date Request Received: _____ Initials: _____

Receipt #: _____ Date Mailed: _____