



Clark County Building & Fire Prevention Records Records Request

Deliver, Mail, Fax, or Email to:
 4701 W. Russell Rd., Las Vegas, NV 89118
 702-382-3566 (Fax)
dsrecords@clarkcountynv.gov

Attention: Public Records

Request Date: _____

Requestor Contact Information:		Records Request Information:	
Name:		Address:	
Organization:		Permit No.:	
Address:		Parcel No.:	
City, State, Zip:			
Phone:			
E-mail:			

Records Requested:

Check one: Paper copies Electronic copies Certified copies Inspection (in person)

Please be specific and include as much detail as possible regarding the records you are requesting.

To complete an estimate, the agency will need the following information:

<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>Must provide Postage</i>	<input type="checkbox"/> E-mail (if format allows)
---	--	--	--

Statement

I understand there is a charge for copies of public records. I understand I will receive a written estimate for production of the records indicated above if the estimated cost is expected to be over \$25.00, which I will be required to pay in full prior to reproduction. I acknowledge that the Nevada Public Records Act (NRS 239.001) does not supersede or in any manner affect the federal laws governing copyrighted records, plans, documents or other materials.

Requester Signature	_____
	Signature

Office Use Only

Request Received:		Request Completed:	
Estimate Provided:		Estimated Completion:	
Time spent on Request:		Request denied in whole:	
Completed By:		Fee charged:	\$
Number of Electronic Records:			
Number of Hard Copies:	8x11	11x17	24x26

Comments: _____