STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION
3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102
(702) 486-4033 / realest@red.nv.gov / http://red.nv.gov/

EXPERIENCE VERIFICATION FOR A NEVADA PROPERTY MANAGER NRS 645.6055

FORM MUST BE COMPLETED BY VERIFYING BROKER.

1. **Name of Permit holder:** _____ **Permit Number:** _____

   State of issuance: _____

2. **Employment History:** ☐ Full-time ☐ Part-time

3. **Employment Dates:** From _____ to _____

   From _____ to _____

   From _____ to _____

   Month / Day / Year Month / Day / Year

Multiple lines may be used for breaks in employment with same broker and company only.

---

4. **Broker Declaration:**

   This is to verify that I, _____ , am/was the real estate broker for the company named: _____

   (check the boxes that apply)

   ☐ I am/was the real estate property manager. Permit Number: PM. _____

   ☐ I authorized _____ , permit number PM. _____, as the designated property manager located at: _____

   Under penalty of perjury, I declare that the foregoing is true and correct.

   Print Name: _____ Signature of Broker: _____