

OWNER'S RELEASE OF CONFIDENTIAL INFORMATION FORM

This sworn statement made under oath, pursuant to NRS 250 and Court Order, authorizes the Clark County Assessor's Office to release the following information:

- | | |
|--|--|
| <input type="checkbox"/> All Assessor Information (includes everything listed) | <input type="checkbox"/> Aerial Photography/Images |
| <input type="checkbox"/> Name | <input type="checkbox"/> Building Sketches |
| <input type="checkbox"/> Address - mailing | <input type="checkbox"/> Exemption Renewal Card |
| <input type="checkbox"/> Address - location | <input type="checkbox"/> Exemption DMV Voucher |
| <input type="checkbox"/> Recorded Document/Deed Number | <input type="checkbox"/> Other _____ |

To the following companies, governmental agencies, or individuals:

Whose mailing address is:

On the property listed below:

Assessor Parcel Number: _____

Exemption Number/Name: _____

Manufactured Mobile Home ID: _____

This authorization will remain in effect from _____ to _____
or up to six months from signing date.

I understand that by signing this Release Authorization Form, I am authorizing the Assessor's Office to release to the above-named company, agency or individual, information that would be considered confidential and not otherwise be available to them pursuant to NRS 250 and the Court Order issued for the above-referenced Assessor's parcel number, Exemption number/name or Manufactured Mobile Home ID.

(Signature)

(Print or type name here)

STATE OF _____)

Seal (if any)

COUNTY OF _____)

Signed and sworn to (or affirmed) before me on this _____ day of _____,
20____ by _____ (name of person(s) making
statement).

_____, Notary Public
(Signature of notarial officer)