



JUSTICE COURT, MOAPA VALLEY TOWNSHIP

CLARK COUNTY, NEVADA
320 N. MOAPA VALLEY BLVD.
OVERTON, NV 89040
702-397-2840 FAX: 702-397-2840
MoapaValleyJCPR@clarkcountynv.gov

Request For Copies

I hereby request copy(s) of records for the following-named individual.

_____ CRIMINAL _____ CIVIL _____ EMAIL _____ PRINTED COPY
_____ CERTIFIED

REQUESTOR'S NAME: _____
Last Name First Name Middle Name

DEFENDANT'S NAME: _____
Last Name First Name Middle Name

ALSO KNOWN AS: _____

DATE OF BIRTH: _____

ADDRESS (if known): _____

CASE/CITATION #: _____

Paperwork requested: _____

Additional Remarks: _____

I also understand if I request a photocopy of any record it shall cost \$.50 per page for the record to be photocopied and an additional \$3.00 per page if the photocopies are to be certified. I agree to pay that amount at the time of making the request **(cashier's check or money order to Moapa Valley Justice Court)** and enclose a stamped self-addressed envelope.

I further understand that this record search was based on "name only" and the Moapa Valley Justice Court does not guarantee that any record found concerns the individual in whom the party requesting the information is interested.

I further agree to release from liability and promise to hold harmless, under any and all causes of legal action, the Moapa Valley Justice Court, judge, and/or employees who conduct any record search for any statement(s), omissions(s) or infringement(s) upon any legal rights that may be involved in conducting this search.

A reproduction of the request for Research of Criminal Records for all intents and purposes shall be considered valid as the original.

DATED this _____ day of _____, 20 ____.

(SIGNATURE)

(COMPANY & TITLE)

(ADDRESS)

(PHONE NUMBER)

DEPUTY COURT CLERK

DATE