

## **Department of Real Property Management Property Management and Acquisition Division**

500 S. Grand Central Pkwy. 4<sup>th</sup> Fl, Las Vegas, NV 89155-1825
Office: (702) 455-4616 | Email: RealpropertymanagementPMA@ClarkCountyNV.Gov
https://www.clarkcountynv.gov/government/departments/real\_property\_management/

## PROPERTY ACCESS AND USE REQUEST

The County does not provide real estate services, identify or research property for non-County use. Please contact a real estate agent, broker or other professional of your choice for those services.

All requests are subject to approval and are not guaranteed.

APPLICANT INFORMATION						
Name:	Title: _	В	usiness Name:_			
☐ Individual ☐ Corporation/LLC		Government Agency Nor		Non-Profit		
Address:	 t # And Name	Citv	State	Zip		
		·		·		
CORRESPONDENT (IF DIFFERENT THAN APPLICANT)						
Name:	Title: _	В	usiness Name:_			
	t # and Name		 State	Zip		
	t # and Name	,		•		
Phone: Email:  COUNTY PROPERTY INFORMATION						
Assessor's Parcel Number(s):						
Address:						
Stree	t # And Name	City	State	·		
Cross Streets:	Cross Streets: SF/AC Area Requested:					
TYPE OF AUTHORIZATION REQUESTED						
☐ Easement ☐ Temporary License (1 Year or Less) ☐ Grading						
☐ Temporary Access ☐ Temporary Construction ☐ Other:						



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ADDITIONAL REQUEST DETAILS				
Duration Of Request:	Start & Stop Dates:			
Request Description (i.e intent of use, antici site etc):	pated activities, equipment list, number of employees/staff on			
Justification to Occupy Clark-County Owned	Land:			
REQUIRED DOCUMEN	NTATION (to be attached to this application)			
Aerial Map of Property Exhibit of Request Construction Or Design Plans (Not F Written Legal Description (If Availal Title Report (Not Required For Leas Copy Of Any Existing Rights (If Applicable	ole) e Request) icable)			